

# **INVESTIGATION INTO DISCRIMINATION AGAINST TRANSGENDERED PEOPLE**



**Jamison Green, Principal Author**  
**Larry Brinkin, HRC Staff**

**A Report by the Human Rights Commission**  
**City and County of San Francisco**  
**25 Van Ness Avenue, Suite 800**  
**San Francisco, California 94102-6033**  
**415-252-2500**

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**September, 1994**

**In Memory of Shelley Elvira Salieri**  
**Died May 26, 1996**

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## Preface

The public hearing and this report resulted from allegations of discriminatory treatment in employment, hiring practices, housing, public accommodation, and child custody based on gender identity throughout San Francisco, and the absence of law or statute to facilitate redress.

This report, the culmination of over nine months of effort, is a compilation of material, testimony, and data submitted by community organizations, business owners, civil servants, individuals, and research done by staff. All of those who testified, submitted written materials, and offered commentary added much to this report and its recommendations. Every attempt has been made to accurately reflect the information submitted.

The Human Rights Commission gave this project priority by holding the public hearings and providing the oversight policy decisions to ensure proper balance and representation. The Commissioners participating were: Lucille Abrahamson, Chair; Mary Gomez Daddio, Vice-chair; Gloria R. Davis, Katheryn Fong, Sharon Gadberry, May P. Jaber, Jeanette Gandionco Lazam, Calvin Y. Louie, James Haskell Mayo II, Resa Peay-Wainwright, and Earl Rynerson, of whom Commissioners Abrahamson, Daddio, Davis, Fong, Jaber, Lazam, and Rynerson attended the public hearing. Members of the Human Rights Commission staff—Acting Coordinator Larry Brinkin, and Representatives Brian Cheu and Cynthia Goldstein—performed the tasks of formulating, advertising, coordinating, directing, and holding the public hearing; identifying, contacting, meeting with and notifying individuals, organizations, City officials, agencies, businesses, community groups and the media; collecting, analyzing, and evaluating data and public testimony; reviewing and commenting on the successive drafts of this report. Staff will also implement the Commission's recommendations. The staff would especially like to thank intern Edward Kaufman for providing invaluable assistance organizing the public hearing, and also intern Rachel Meny for her excellent research. Special recognition goes to Jamison "James" Green, writer, gender diversity consultant, and director of FTM International, who authored this report under the direction of Larry Brinkin.

Special acknowledgment is also due to the present and former members of the Lesbian Gay Bisexual Transgender Advisory Committee of the Human Rights Commission: Mark Baldwin, Virginia Benavidez, Jim Bolig, Brian Cheu, Vincent Crisostomo, Viva Delgado, Liz Dunn, Lani Ka'ahumanu, Carol Kleinmaier, Nancy Koch, Commissioner Jeanette Lazam (Chair), Randy Miller, Adele Morrison, Muriel Parenteau, Terry Person, Commissioner Earl Rynerson (Vice-chair), S. Jean-Paul Samaha, Tara Shannon, Wally Sherwood, Gloria Soliz, M. J. Talbot, Juan Tam, Rachel Timoner, Kiki Whitlock, and Lawrence Wong (former Vice-chair). Particular recognition also goes to the Transgender Task Force chaired by Kiki Whitlock, to the members of ETVG, FTM International, Transgender Nation, the many contributors who participated but who wish to remain anonymous, and to Mae J. Chu (court reporter).

## Summary

Reports of harassment, violence, denial of services, and unfair treatment against transgendered individuals in the areas of employment, housing and public accommodation have been discussed in local media, and more than 40 complaints have been brought to the attention of the Human Rights Commission over the past six years. These complaints have been referred to the Lesbian/Gay and AIDS/HIV Unit of the Commission, which has endeavored to mediate without benefit of law, and without fully understanding the situation of transgendered individuals.

Sometimes the mere presence of a transgendered person is enough to evoke violence in people who are prejudiced against them. Sometimes when a transgendered person seeks help from social service agencies, no help is available. Sometimes when a transgendered person gathers the courage to acknowledge his or her situation, that person may be found suddenly unqualified for the position he or she had held for years. Sometimes the discrimination is more subtle, such as when the transgendered person is made to understand that if anyone were to find out about her or him, the consequences would be devastating. For the thousands of people living transgendered lives in San Francisco, the pressure of this adverse treatment has become too much to bear.

In spring 1993, the Lesbian/Gay/Bisexual Advisory Committee of the Human Rights Commission seated Kiki Whitlock as the first self-identified transgendered member. The Committee then organized the Transgender Task Force as a sub-committee chaired by Ms. Whitlock, and charged it with coordinating educational presentations. Over a period of eight months, representatives of the transgender community gave a series of presentations to the Committee. These presentations demonstrated to the Committee the diversity and depth of the transgender community, and the extent of the discrimination affecting it. On February 24, 1994, the Commission voted to amend the Advisory Committee's name to add the word Transgender, and also voted to hold a public hearing to investigate discrimination against the Transgender Community.

The public hearing, held May 12, 1994, was attended by Commissioners Abrahamson, Daddio, Davis, Fong, Jaber, Lazam, and Rynerson, Commission Director Lee, Robert Oakes representing the Office of Mayor Frank Jordan, Supervisors Terence Hallinan and Kevin Shelley, and representatives of the City Attorney's Office, the Human Resources Department, Department of Public Health, Department of Social Services, Police Department and Sheriff's Department. The purpose of the hearing was to investigate the extent of discrimination against the transgender community and to permit the community at large to air its views regarding the need for protective legislation to alleviate the victimization and exploitation of transgendered people.

The public hearing was organized into eight segments:

**1. Introduction**—in which the City officials were recognized and the attendees acknowledged. Commissioners Abrahamson and Lazam and Robert Oakes

each noted that it is the goal of this City to eliminate discrimination and prejudice and to provide all citizens with equal justice and equal opportunity, noting where there is an injury to one there is an injury to all. Also, Kiki Whitlock, Chair of the Transgender Task Force of the Lesbian Gay Bisexual Transgender Advisory Committee (LGBTAC), introduced the concept of Transgender, in which one's anatomical sex usually does not match one's gender identity. She noted that discrimination against a person for being gay, lesbian, or bisexual in San Francisco is against the law because sexual orientation is a protected class. However, transgendered people are not protected.

**2. Overview**—in which Kathy Jones defined gender identity, and differentiated it from sexual orientation: Gender Identity is that hard to define sense of being male or female that is usually in accord with but sometimes opposed to physical anatomy. There is no agreement on how gender identity is formed, but most current theories say that gender identity is formed *in utero*.

Legal Intern Edward Kaufman gave a report on legislation protecting gender identity or transgendered people in other jurisdictions: Minneapolis covered transgendered people under the term "affectional preference" which is a protected class in Minneapolis's 1974 Civil Rights Ordinance. That definition of "affectional preference" includes individuals having a projected self-image not associated with one's biological maleness or femaleness. Under this ordinance, the administrative agency established for this purpose has investigated over 200 affectional preference claims of discrimination. In 1986, the City of Seattle extended the definition of sexual orientation to include transgendered individuals under legislation that considers sexual orientation a protected class. Numerous complaints have been investigated and mediated there through Seattle's Human Rights Commission. The State of Minnesota enacted legislation in August, 1993, to protect transgendered individuals under "sexual orientation," defined as having or perceived as having a self-image not traditionally associated with one's biological maleness or femaleness. And in Santa Cruz, California, legislation was passed in 1992 protecting transgendered individuals under the definition of "gender," which explicitly includes persons who are known or seen to be transgendered; no cases have been brought under this legislation, perhaps due to the lack of an administrative agency to help process the claims.

Thalia Gravel, Max Wolf Valerio, and Luanna Rodgers spoke about the history of the transgender community, about its diversity and richness, and about the intensity of the prejudice and discrimination against its members. Ms. Rodgers, a psychotherapist, noted that "Modern psychological thought no longer deals with transgender feelings and behavior as pathological. Modern social thought has not caught up with this view. ... The problem isn't inherent to their gender identity—it rests with society's response to it. We need relief from transgender-phobia just as we need relief from homophobia, sexism, and racism."

**3. Cases of Discrimination**—in which twelve speakers described actual experiences of discrimination in employment, housing, public accommodations and business practices, medical services, social services, and treatment by the police. One speaker also described the horror of being subjected to abusive psychiatric treatment as a transgendered child. HRC staff member Larry Brinkin provided an

overview of discrimination cases based on his experience of having processed 40 complaints in employment and public accommodation over five and one half years. He noted that the complaints in the employment arena have been of every kind: failure to hire, failure to promote, on the job harassment, failure to provide reasonable accommodation for medical needs, and termination. In the area of public accommodation, transgendered complainants have told him "of being asked to leave stores and restaurants, of being ignored in them. Many clients of City departments have told me of rude treatment at best and no treatment at all in some cases when they had sought services from the City. ... I have also had complaints from transgendered prisoners and arrestees who have experienced problems with police and sheriff's personnel. The most heartbreaking case I've had was Michelle...a medical technician named Michael for 12 years, (who) won numerous awards and commendations. When she began her transition from male to female and started hormone treatment and wearing female clothing and make-up, she was harassed by co-workers and supervisors. Her boss told her she was a sinner and that God hates perverts, and she was terminated. I did some processing of Michelle's complaint and was preparing for an investigation. One day I called her at home. Her sister answered and said that Michelle had committed suicide." Mr. Brinkin dedicated his remarks during the hearing "to Michelle, who courageously fought back as long as she could."

**4. City and County Agencies**—in which representatives from the Department of Social Services, Department of Public Health, Department of Human Resources, the Police Department and the Sheriff's Department stated their commitment to equal justice, treatment and access for transgendered people, and admitted that there was ignorance and some hostility throughout various agencies. Each representative stated his or her agency's intention to improve with the help and recommendations of the Human Rights Commission. Police Sergeant Stephan Thorne was introduced and spoke of his great relief knowing that as a transsexual City employee his job was protected under Proposition L. He urged the Commission to recommend legislation that would protect all people in San Francisco.

**5. Services and Organizations**—in which thirteen speakers acquainted the audience with the services and organizations that directly serve the transgender community, some of which originated within the transgender community, and many of which are sensitive and responsive social, religious, medical, gay and lesbian organizations which have readily recognized the needs of the transgendered population.

**6. Transgender Communities of Color**—in which transgendered individuals from the African-American, Latino/Latina, Asian/Pacific Islander, and Native American communities explained what it was like for them to live with multiple-minority status.

**7. Youth and Families**—in which speakers appealed to the Commission on behalf of transgendered youth, and of families of transgendered persons who suffer as much as transgendered people when their loved ones are abused, harassed or discriminated against.

**8. Public Testimony**—in which 28 private individuals urged the Commission to recommend legislation that would protect them or their friends and associates who were transgendered. Written testimony was received from 14 people; only two of the written statements opposed the idea of legislation to protect transgendered people.

Based upon evidence so gathered, the Commission announced its findings and recommendations on August 11, 1994. It concluded that while San Francisco has a history of refusing to tolerate discrimination, such discrimination does exist in practice, affecting persons who are transgendered; that existing laws and policies often undermine the dignity and privacy of, and do not include protections for, transgendered persons; that transgendered persons are subject to severe discrimination in employment, housing, and public accommodations; that transgendered persons have experienced harassment by members of the San Francisco Police and Sheriff's Departments; that transgendered persons have experienced great difficulty in obtaining medical and social services from hospitals, public health agencies, rape crisis centers, battered women's shelters, homeless shelters, and other organizations in San Francisco; that the news and entertainment media tend to perpetuate stereotypes in their coverage or treatment of transgendered persons and issues, and the ill-informed biases expressed in these media then become a sanction perpetuating discrimination.

The Commission recommended, in part, that the City enact legislation amending the City's Human Rights Ordinance to add "gender identity" as a protected class with the intention of granting specific human rights protections to persons who are or are perceived as transgendered or transsexual, and empower the Human Rights Commission to serve as the administrative agency to investigate and mediate claims that arise; that insurance companies acknowledge that transsexualism is a medical condition for which medical treatment is warranted and for which insurance coverage should be available, and that the City Plan be amended to serve as a model; that transgender sensitivity trainings be offered throughout the City departments, public service agencies, and businesses in the private sector to demystify the subjects of transsexualism and transgender experience and ensure that transgendered people are treated with the dignity and respect they deserve as citizens of, employees in, and visitors to San Francisco.



## Chapter 1—The Transgender Community

An essay in two parts by Jamison Green.

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### A. The Transgender Experience

From the very limited studies that have been done to date, it's estimated that 1 to 3% of the world's population is transgendered. Gender dysphoria, defined as "persistent discomfort and sense of inappropriateness about one's assigned sex," may occur in milder forms, and transsexualism is characterized by a profound and persistent crossgender identification. This is not easy to sustain in the face of ridicule and threats of or actual physical harm. But transgendered people do sustain it because to do otherwise is to live a lie, and sometimes they die in the streets for it. Most people experience their gender identity as being the same as their physiological sex regardless of their sexual orientation. We have been culturally conditioned to believe that gender and sex are the same thing. The terms are used interchangeably, but in fact they are very different. Sex is the type of genitals we have— male or female; sex is something that we do with our bodies when we engage in intimate physical relations with another person. Gender is the expression of masculinity or femininity, which is a sense of self, a reflection of spirit or soul, and which is perceived by others using numerous social signals that have nothing to do with one's sex or sexual orientation. When people hold the conviction that gender identity or presentation and physiology *must* be the same, their reaction to an individual who contradicts that conviction is confusion, agitation, even rage. When we use terms like sex "roles" or gender "roles," our language subtly conditions us to doubt the authenticity of a person's self-expression.

Transgender, in its broadest sense, means mixing elements of both genders, sometimes both sexes. The category covers cross-dressers, transsexuals, masculine women and feminine men. Victims of "gay bashing" are often singled out for their transgender characteristics, which is assumed to—but may not always—reflect an individual's sexual orientation.

Thousands of women remain in jobs that have a logical requirement of male attire (such as production or warehouse workers) because those women simply cannot bear to wear feminine clothes or conform to cultural standards of beauty. Some of these women may be lesbians, some heterosexual, some bisexual. Some may not be women at all, but female-bodied persons who may or may not want gender confirmation surgery, commonly called sex reassignment surgery, or sex change.

The process of coming to grips with the fact that one's true gender is at odds with one's physiology is long and frightening. People who identify as transsexual are usually aware of their condition from a very early age, but they have no language with which to express their feelings. In spite of their efforts to keep their discomfort a

secret, masculine girls and feminine boys are often taunted and ridiculed by their peers, and tolerated or shunned by their parents, if they are not actively abused in an effort to change the behavior that others assume is voluntary. The condition of being a transgendered child is beyond that child's control. By the time the child is old enough to find the language of "trans," he or she is well aware that there is nothing they can do to redeem themselves for being who they are other than to choose to live truthfully, honestly, with dignity. Sometimes they are so beaten down by "society" that the only survival mechanism they have left is to act out, to tell the self-deprecating joke first, to dare strangers on the street not to notice them. Most transsexuals are deeply wounded by the difficult challenges of negotiating the transition from male to female or from female to male: the social, emotional, financial costs can be extraordinary. It takes a very strong person to endure the process.

Once they have accomplished their transitions, many transsexuals, just like gay men or lesbians, can keep silent, stay in their closets, and probably pass for ordinary. Some transsexuals can't do that because they don't look ordinary. Many male-to-female transsexuals, in particular, are unusually large or tall or bony—choose whatever discriminatory standard of female beauty you wish. Sometimes women who are taller than average, even those who are strikingly beautiful, are suspected of being male-to-female transsexuals. Sometimes men with long hair are assumed to be transsexuals. Sometimes women who are muscular are assumed to want to be men. Sometimes men who wear an earring are suspected of being feminine, of being gay, or of being crossdressers; some people think these characteristics are all the same thing. In April, 1992, Cameron Tanner, a male-to-female crossdresser and 22nd Empress of San Francisco's Transvestite community, died from complications resulting from brain injuries suffered in a bashing at 16th and Capp Streets the previous month. Did he deserve to die for putting on a dress? Last Christmas a young female-to-male crossdresser (who may have been cross-living in preparation for surgical sex reassignment) was brutally raped and murdered in Nebraska, because a couple of male "friends" apparently felt a need to demonstrate "real" masculinity. Who is threatened by gender ambiguity, and why? Who is confused about gender?

The transgendered community is admittedly "queer," even for those who identify as heterosexual. Many transgendered people believe that if they can just get the medical attention, hormones and surgery they need to resolve their gender conflict, then all their problems will be over. So they explain their condition as if it is a birth defect, hoping that it will be deemed worthy of medical treatment. Gender dysphoria was once classified as a medical condition, and Federal funds were available for diagnosed people who did not have insurance coverage, who may have been on the verge of suicide because they could not function in the social role prescribed by their external genitalia. But the Nixon administration removed this safety net, and that cleared the way for insurance companies to decide that they didn't have to pay for *any* treatment deemed cosmetic, elective, or experimental in nature. And in 1992, Senator Jesse Helms was successful in removing protection for transgendered people from the Americans With Disabilities Act. Gender dysphoria is now classified as a psycho-sexual disorder. Thus, Federal funding is no longer available for gender confirmation surgery, but it is still readily available for electroshock and other barbaric treatments, if deemed psychiatrically necessary.

Gender dysphoria is not a disability; gender difference is a naturally occurring variation. But for some people, being transgendered certainly can be a disabling condition. It can be disabling before the individual comes to grips with it, or if it is not treated, or even when it is. I know about a young man who sought gender confirmation surgery at a major hospital on the East coast. He had the full support of his parents. The doctors evaluated him and accepted him as a candidate for surgery. They discussed the procedure and agreed on the genital modifications that would be made. But when the young man woke up he found the surgeons had experimented with his body. He was in recovery for several months, and had serious urinary tract problems. The doctors tried several painful treatments without success, and then told him they could do nothing more for him. A year later he was bedridden, unable to work, with a constant fever, infection, and pain. Because he was transsexual, no one would help him. No one would help his parents or his wife as they endured his pain with him. The young man's father, himself president of a corporation with several lawyers on his staff, was unable to find an attorney to assist in addressing the issues. Somehow the young man found the FTM (Female-To- Male) peer support group in San Francisco and received a referral to a surgeon and urologist in another state who could possibly help him, and to a lawyer in yet another state, who was sensitive to transgender issues and willing to undertake the malpractice suit against the original physicians. But that young man has been physically and psychically disabled by the system that discriminates against him, not to mention the abuse he suffered at the hands of so-called "helping professionals."

I know of another case in which a man's employer implied to him that because he had undergone gender confirmation surgery, he would probably be having further surgery, and therefore, because the employer feared the man would require more time off for surgery, he probably should no longer hold a management position in the company, regardless of his excellent performance and qualifications. Although he explained that his surgery was complete and he did not require further treatment, the employer would not be convinced. Aware that the action was political in nature, and not performance-related, the employee had no legal recourse because he did not want to expose his transsexual status. He was transferred against his will to a position which did not match his skills and in which he was so bored and frustrated that his only hope for relief was to leave the company. This is an ostensibly enlightened Bay Area company which prides itself on its concern for its employees. Employers do not behave similarly toward women with heart disease or men with gallstones.

Transgendered people need legislative support. They need enlightened practitioners in all the professions that serve them. They need allies who can help obtain and protect their civil rights. It is very likely that today's known transgendered population is just the tip of the proverbial iceberg. As in any "queer" community, when people know there are others like them they are less afraid to come out of their closets. The transgendered community is growing, and the social freedom of its members will benefit everyone because we will all be freed from the prison of one more prejudice.

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## **B. A Short History of the Transgender Community—a personal view.**

The world's transgendered population, like other marginalized groups, has a long history of creativity, bravery, leadership, courage, vilification, persecution, victimization and oppression. This history, however, is tangled with and sometimes obscured by the history of homosexuals. There are also mythological explanations for the phenomenon of people who simply don't fit into society as the men or women their bodies would imply them to be. People who could be perceived as transgendered have appeared in narratives and legends from almost every culture, and nearly every epoch of recorded history. Sometimes these people are interpreted and categorized as homosexual, sometimes bisexual or asexual. Sometimes there are actual sex changes in the stories, and sometimes the images are merely metaphors.

Athena, who sprang full-grown from the forehead of Zeus, may be Western history's first recorded image of transsexual inclinations. And Hera, jealous of Zeus's achievement with Athena, parthenogenically gave birth to Hephaestus, the outcast whose passionate soul was driven to create beauty out of pain. These archetypes, these tales of non-biological birth, reflect the desire to re-create oneself in the opposite gender.

The Theban seer Tiresias was a well-known transsexual; that is, he was transformed into a woman and in later life was restored to his original (though older) form. Because Tiresias had knowledge of both masculine and feminine psyches and experience, Zeus asked him to settle an argument between himself and Hera over whether men or women better enjoyed the pleasures of love. It is said that he voted nine to one in favor of women. If there were no societal need for the transgendered psyche, these myths would not exist. And all archetypes are rooted in actual human experience.

In China, the male deity Kuan-yin changed sex and evolved into the goddess of mercy. There are many popular tales of Kuan-yin's adventures, and, traditionally, she is the most popular Chinese god. It is fitting that mercy should be the province of the transgendered, because the power of the transformation teaches compassion to the transformed.

Jeanne d'Arc was executed for refusing to wear women's clothes. And American history is full of stories of women who lived their lives as men. Called "passing women," the reason for their existence has been attributed to the social, economic and sexual oppression of women. But no one knows whether, if given the language and permission to express themselves fully, these "women" would not have called themselves men.

The Hijra of India, transgendered and transsexual devotees of the mother goddess Bahuchara Mata, were turned into social pariahs during the British occupation. The Babain of the Philippines, transgendered priests and priestesses were regarded as most holy by their people until the Catholic missionaries eradicated them

in the 1800s. Transgendered Native American people were named Berdache by the French explorers who first encountered them here. In the Pacific Northwest there are still stories and depictions of transformation spirits: man/whale, woman/seal, man/eagle, woman/man.

In 1952, America was shocked and fascinated by the appearance of Christine Jorgensen, the first publicized male-to-female American to experience surgical sex reassignment. Yet few people know that the first female-to-male surgical procedure was performed three years earlier in England. Modern science made it possible for transgendered people—that is, people whose gender identities do not align with their bodies—to obtain medical treatment and surgically and hormonally alter their bodies so they could live in a gender-congruent manner, regardless of sexual orientation. The term "transsexual" was coined in 1953 by endocrinologist Dr. Harry Benjamin. The advent of medical treatment ushered in a whole new set of ethical debates concerning the propriety of altering apparently healthy bodies, the control of access to the technology (selection of candidates for procedures), and the restriction of treatment to those who can afford it. These are debates in which transsexuals have engaged as vociferously as any other interested party. Answers are complex, and beyond the scope of this report; however, the fact that transgendered people exist has not been obviated by these debates. And people who wish to express their gender identity as opposite that of their apparent genitalia without obtaining surgery are still with us.

In the mid-1970's, Virginia Prince, author of numerous books on transvestisim, wishing to distinguish herself from occasional cross-dressers as well as from transsexuals, coined the term "transgendered" to mean people who cross-live full-time. That is, men who present as women, and women who present as men 100% of the time without having had a surgical sex change. Seeking to end their isolation and to find social acceptance, transvestites, transgenderists, and transsexuals began to form social and educational clubs and to hold regional, national, and international conferences. Weary of seeing themselves misinterpreted by theorists and limited scientific studies, transpeople have begun to assert themselves in the last several decades in ever larger numbers. Now the word "transgendered" has been adopted as an umbrella term in an effort to unite the many factions of the gender-oppressed and to build a community. That community may not always agree on all the issues, but it has now definitely come forward to call for an end to the persecution of people whose gender identity or physical history distinguishes them from the majority.

Here in San Francisco, as in many other cities across the United States, and even around the world, transpeople are coming forward to call for an end to excessive pain and suffering, to restore lost dignity, to demand the basic respect accorded to every human being in a civilized society. We are calling for an end to hatred, to abuse, to disrespect. We are calling for the right to define ourselves, to say for ourselves who we are. And we are calling for the end of persecution, be it based on fear, ignorance, or bigotry. We are asking to be recognized because we exist. We are reclaiming our past, and we intend to have a future.

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## Chapter 2—Introduction to the Public Hearing

This Chapter describes the Commission's motivation and methodology for conducting the public hearing.

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### Operating Authority

The Human Rights Commission held this public hearing and prepared this report under the jurisdiction of Chapter 12A of the San Francisco Administrative Code, which reads, in part:

"the Commission shall have the power and duty to:

(a) Study, investigate, mediate and hold public hearings on community-wide problems arising in this City and County which may result in inter-group tensions or discrimination."

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### Objectives

The objectives of this investigation were:

- A. to learn about the experience of the Transgender Community.
- B. to identify the allegations of possible discrimination.
- C. to solicit testimony from the community as to the nature of any discrimination against individuals and organizations.
- D. to prepare findings, documenting the results of the public hearing.
- E. to propose appropriate recommendations and solutions to alleviate discrimination against transgendered people.
- F. to assist in the implementation of the recommendations proposed.

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### Methodology

Upon recommendation of the Lesbian Gay Bisexual Transgender Advisory Committee (LGBTAC), the Commission determined that a public hearing was necessary to investigate the extent of discrimination against the transgender community in San Francisco, and that a report of the hearing with findings and recommenda-

tions would be issued. The Commission directed staff and the advisory committee to perform logistics for the hearing.

The Commission's Transgender Task Force (a sub-group of the LGBTAC) held a series of planning meetings to decide the main areas of interest for which testimony would be solicited, and to identify the most appropriate speakers to invite for each of the areas. The participation of the transgender community in planning the hearing was extensive, and unprecedented for the Commission.

The Commission staff sent letters to Mayor Frank Jordan, the eleven members of the Board of Supervisors (San Francisco's legislative body), the Chief of Police, the Sheriff, the Director of the Department of Public Health, the General Manager of the Department of Social Services, and the Director of the Department of Human Resources, soliciting their attendance and comments at the hearing regarding the transgendered and transsexual population of San Francisco. Letters were also sent to the remainder of the 42 invited speakers—community activists and representatives of community-based organizations.

Publicity for the hearing consisted of:

- News releases
- Public Service Announcements (PSA's) for radio and television
- Guest spots on radio talk shows by staff and transgender community activists
- Distribution of thousands of flyers by staff and the Transgender Task Force members at community events and on the street
- Posting flyers on bulletin boards around the city and posting notices on computer bulletin boards
- Announcements at transgender community events and at lesbian/gay/bisexual organization meetings
- Mailing news releases and flyers to over 300 Bay Area organizations

Legal Interns Rachel Meny and Edward Kaufman, working with Commission staff, researched and reported on existing gender identity legislation in the United States and Canada.

Staff prepared press packets and information packets for Commissioners, consisting of a glossary of terms and transgender literature.

The public hearing was held in the Board of Supervisors' chambers in San Francisco's City Hall from 4:30 to 9:00 p.m. on Thursday, May 12, 1994. The testimony at the public hearing came from community and social service organizations, businesses, and individuals who might have experienced discrimination or who had something to say on the issue. City and County agencies were given three minutes with which to make their presentations; most other speakers were given one or two minutes. Questions by Commissioners were allowed after each presentation. On May 12, forty-two (42) scheduled speakers testified and twenty-eight (28) additional speakers testified. Written testimony (in addition to copies of texts presented orally) was submitted by 14 individuals. Only two of the written statements (and none of the

oral statements) were opposed to the creation of protective legislation for transgendered people. (See Chapter 3 for detailed information.)



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## Chapter 3—Excerpts of Public Testimony

This Chapter presents summarized versions of the entire testimony offered at the public hearing, in both oral and written forms.

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### Oral Testimony

#### 1. Introduction

Human Rights Commission Chairperson Lucille Abrahamson called the hearing to order and asked for the roll: Commissioners Daddio, Davis, Lazam, Rynerson, and Commission Director Lee were present; Commissioners Fong, Gadberry, Jaber, Louie, Mayo, and Peay-Wainwright were absent. Commissioners Jaber and Fong arrived later. Also present were Supervisors Terence Hallinan and Kevin Shelley.

Commissioner Abrahamson introduced Robert Oakes, special assistant to Mayor Frank Jordan, who commended the Human Rights Commission for all of its hard work in creating a policy of human dignity in San Francisco. He noted that the City of San Francisco values diversity and has a history of tolerance, and that it is fundamental to a thriving global economy to assume that all people have a potential to create value in the community and so must be valued as community members. He also recognized that the issues of discrimination relating to transgendered people are unique due to the historical invisibility of the transgendered, the lack of understanding by others, and the absence of dialog and discussion. He stated that the Mayor's Office looked forward to receiving a report and recommendations on transgender issues from the Human Rights Commission.

Commissioner Abrahamson introduced Commission Director Edwin Lee who acknowledged the audience, the members of the transgender community, the Human Rights Commission staff, and the representatives of the City Attorney's Office, the Department of Human Resources, the Department of Public Health, the Police Department, Sheriff's Department and Department of Social Services. He stated that it was his intention to learn from the testimony and follow through with the necessary action to make legislation and perform civic duties in such a way as to show the same respect to the transgender community as would be shown to any group of citizens who may be otherwise targeted or victimized, not only in San Francisco, but in the Bay Area as well.

Commissioner Abrahamson introduced Commissioner Jeanette Lazam, Chair of the Lesbian Gay Bisexual Transgender Advisory Committee to the Human Rights Commission, who then took on the responsibility of chairing the Public Hearing. Commissioner Lazam explained the purpose and the rules of procedure of the hearing, and called for the first speaker to be introduced.

**Kiki Whitlock, Chair of the Transgender Task Force of the Lesbian Gay Bisexual Transgender Advisory Committee (LGBTAC) to the Human Rights Commission**

Ms. Whitlock stated that she was the first transgendered person to become a member of the LGBTAC, which is one of five standing committees of the San Francisco Human Rights Commission. Since her appointment one year ago, two other transgendered people have become members.

Ms. Whitlock stated that while discrimination against a person for being gay, lesbian or bisexual is against the law in San Francisco because sexual orientation is a protected class, transgendered people have no such protection. She defined the transgendered to include transsexuals, cross-dressers, drag queens, and impersonators. She pointed out that gender identity and sexual orientation are two different concepts: while sexual orientation has to do with a person's sexual interests, gender identity addresses the issue of which gender we feel ourselves to be.

Ms. Whitlock gave a history of the Transgender Task Force: in August 1993 this group commenced monthly meetings and presentations to the LGBTAC on subjects such as homelessness, job discrimination, substance abuse, and health care. Transgendered people of different ethnicities presented their perspectives, and organizations such as Transgender Nation (TN), Educational Transvestite Channel (ETVC) and Female-To-Male (FTM) provided information.

Ms. Whitlock said that when inviting representatives of the transgender community to speak at these hearings, diversity was a very important element. While the majority of the speakers were transgendered, presenters came from various political groups, service providers, youth, and families and friends. Ms. Whitlock identified herself as a Filipina male-to-female post-operative transsexual woman.

## **2. Overview**

**Kathy Jones, individual testimony**

Kathy Jones identified herself as a post-operative male-to-female transsexual. She repeated the definitions of the term transgendered, and reiterated the difference between gender identity and sexual orientation. She urged the audience to read her glossary of gender, distributed earlier [and included as an appendix to this report].

Ms. Jones asked how many in the audience identified as transsexuals, and noted that although some raised their hands, there were others who did not, due, she pointed out, to the need for secrecy. She then asked for a show of hands from various types of transgendered people.

Ms. Jones said that transgendered people are the experts in the field and that she was available to answer questions, particularly with regard to the use of words and language.

**Edward Kaufman, Legal Intern, Human Rights Commission**

Mr. Kaufman presented an update on legislation that protects the transgendered in other jurisdictions. In 1974, Minneapolis became the first jurisdiction in the country to pass such legislation, covering transgendered people under the term "affectional preference," a protected class under the city's Civil Rights Ordinance. Minneapolis has set up an agency to address complaints under this ordinance, and has investigated over 200 affectional preference complaints.

In 1986, Seattle extended the definition of sexual orientation to include transgendered individuals under legislation that considers sexual orientation a protected class. Seattle has a Human Rights Commission similar to San Francisco's Human Rights Commission which investigates and mediates complaints.

In August 1993, Minnesota became the first state to specifically protect transgendered people. This is done under the term sexual orientation, defined as having a self-image not associated with one's biological gender.

Santa Cruz passed legislation in 1992 protecting transgendered people in their anti-discrimination laws. No cases have been brought forth yet, which Mr. Kaufman attributes to the absence of an agency to process claims. Canada recently protected only transsexual members of the transgendered community, under legislation prohibiting discrimination based on sex.

Mr. Kaufman recommended that San Francisco pass legislation considering transgendered people a protected class, and that the Commission serve as the agency to investigate and mediate claims made under such legislation.

### **Thalia Gravel, individual testimony**

Thalia Gravel presented an overview of the history of the transgendered community. She said that transgendered people have been in San Francisco as long as humans have lived here, but that prior to being labeled they existed simply as a part of every culture. Sometimes they were venerated and sometimes feared. The adoption of a label represents a first attempt at self-definition.

The transgendered came to San Francisco, said Ms. Gravel, for the same reasons as others, and expect the same treatment. She noted that as the transgendered have become more visible, they have become more discriminated against.

Ms. Gravel stated that her own history as a transgendered person is intertwined with gay and lesbian history, and that people misperceive them as the same, using pejorative terms against gays and lesbians that are really about gender. She gave as an example the statement made to a butch dyke, "You really want to be a man."

She said that when Christine Jorgensen's sex change became widely known in the early 50s, transgender visibility emerged. The psychological and medical communities separated the transgendered into transvestites and transsexuals. She said that she doubted anyone fit into any one category, and noted that some trans-

gendered people found it necessary to separate themselves from others, as well as from gays. As the community has grown, however, they have had to overcome prejudices relating to race, class, sexuality, and even gender.

Like gays, lesbians, and bisexuals, transgendered people rarely share their experiences of discrimination with family. Until recently, transgendered people were isolated from each other. Today, however, she pointed to the speakers as proof that a community is emerging.

### **Max Wolf Valerio, individual testimony**

Mr Valerio identified himself as a female-to-male. He said that transsexual men have existed in every time and place. Prior to the development of modern sexual reassignment techniques, biological females who wanted to live as men wore men's clothing and adopted male names. In San Francisco, Jack Bee Garland was detained by police in 1897 for "masquerading" as a man. Garland lived as a man for forty years, and until his death only three people knew he had been originally female. Another famous FTM was Pope Joan, who was stoned to death when his female anatomy was discovered. Today such people are referred to as "passing women."

Mr. Valerio pointed out that the belief on the part of many feminists and lesbians that such individuals lived as men simply because of social constrictions is an incorrect interpretation, that these women lived as men in order to express a deeply felt male gender identity. They endured social isolation and physical discomfort, and the constant threat of harassment and even arrest. Since it was as difficult to live this kind of life as to live the life of a woman, most would not have chosen such an existence if it was not an intrinsic expression of their true selves.

Mr. Valerio said that the facts about FTMs have been obscured and misinterpreted, causing many to feel dislocated and confused when they begin to realize they are transsexual.

Few people realize that the first FTM sexual reassignment surgery occurred in 1949, predating Christine Jorgensen by three years. Michael Dillon, who was British, went on to become a Buddhist monk in Tibet following his transition.

Recently in Nebraska a young FTM named Brandon Teena was beaten, raped and murdered following a newspaper revelation of his female anatomy. Because transgendered people are not covered in the hate crimes bill currently being drafted in Nebraska, this case generated much confusion. Some people want to name Brandon's death a hate crime against lesbians, ignoring his self-identity as a heterosexual man. Mr. Valerio noted, "They say that cross-dressing clouds the issue. I say cross-dressing is the issue. Brandon was murdered because he chose to live bravely as a man."

Mr. Valerio urged the Commission to include the transgendered in civil rights protection legislation so that such hate crimes would not cause similar controversy in San Francisco.

### **Luanna Rodgers, psychotherapist**

Ms. Rodgers is a psychotherapist specializing in the field of gender identity. She testified that she has spent many hours facilitating transgendered people's process of self-acceptance.

Ms. Rodgers stated that although modern psychological thinking no longer treats the feelings and behaviors of transgendered people as pathological, social thinking has yet to catch up, and that she is "alarmed by the frequency with which our lives are disrupted by discrimination."

She stated that her clients represent a cross-section of the community, and include doctors, lawyers, artists, students, the married as well as single, gays, lesbians and heterosexuals, and parents and children. They cross all ethnic lines. While some of her clients are open, most hide their transgenderism for fear that exposure will destroy their lives. All are struggling to overcome gender-based discrimination.

Ms. Rodgers stated that while her clients are strong, thoughtful people, many succumb to substance abuse and/or suicide. The blame for this rests not with their transgenderism, but with society's response to it. She compared transphobia to homophobia, sexism and racism.

Ms. Rodgers stated her hope that the Commission's actions will lead to better services, community responsiveness and protective legislation that will grant basic human rights to all people and help end their suffering.

### **3. Cases of Discrimination**

#### **Larry Brinkin, Acting Coordinator of the Lesbian/Gay and AIDS/HIV Unit of the Human Rights Commission**

Mr. Brinkin stated that his primary task on the Commission is to investigate complaints of discrimination based on sexual orientation; he also handles cases of discrimination against the transgendered. During his five and one-half years at the Commission, Mr. Brinkin has processed approximately 40 complaints relating to the transgendered in the areas of employment and public accommodations. Employment issues have included failure to hire, failure to promote, failure to provide accommodation for medical needs, harassment, and termination. Mr. Brinkin stressed that hiring managers often decide immediately not to hire someone if he or she is transgendered, but that this is difficult to prove. He cited one case, however, in which another employee told him that the manager explicitly stated he would not hire a pre-operative transsexual, though the applicant was fully qualified. Through the Commission's intervention, the applicant secured a position in a different office in the same company.

Two other cases involved transgendered women who applied to do telephone work. The employer said the customers would think that these were men with feminine voices and they would lose the business.

In the area of public accommodations, Mr. Brinkin said he has handled complaints of transgendered people being ignored in or asked to leave stores and restaurants. Many clients have been treated rudely or not at all by some City departments. Transgender arrestees and prisoners have experienced discrimination from personnel within the Police and Sheriff's Departments.

Mr. Brinkin cited the case of Michelle, an experienced medical technician who had won numerous awards. When she began her transition from male to female, she was harassed on the job; eventually her employer, calling her a sinner and a pervert, fired her. During the course of Mr. Brinkin's investigation into Michelle's complaints, she committed suicide.

Mr. Brinkin pointed out that he has been working on such cases without the benefit of legal empowerment. There is no protection for the transgendered on local, state, or Federal levels. Protection under disability law, which Mr. Brinkin used to invoke in such cases, was nullified by the Federal Americans with Disabilities Act (ADA) when Senator Jesse Helms inserted a clause specifically excluding the transgendered from its protection.

Mr. Brinkin urged the City to add gender identity to San Francisco's human rights ordinances.

Mr. Brinkin noted that during the past year he has learned a great deal about transgendered people: that they are vibrant, talented and smart, and that discrimination against them is the most blatant, hateful and horrifying he has seen. He added that the struggles of the transgender community can teach us a lot about what it means to be a woman or a man, or to live your life as yourself and not according to the expectations of others.

Mr. Brinkin dedicated his remarks to Michelle, and pledged to work for transgender equality.

### **Roberta "Bobbi" Dunne, individual testimony**

Ms. Dunne has been a member of the Sheetmetal Workers Union since September 1968. She is a foreman for an air conditioning company. She asked the Commission to develop realistic guidelines ensuring transsexuals the right to live and work in peace. While she did not want to pinpoint discrimination in her industry, she said that she hoped no one would ever have to go through what she has gone through for her job. Ms. Dunne also submitted written testimony (see below).

### **Shadow Morton, individual testimony**

Mr. Morton identified himself as a female-to-male metamorph. He stated that he has been discriminated against by the medical profession and described two such incidents, one at UCSF, and one at Lyon Martin clinic. Mr. Morton stated that the worst form of medical discrimination against the transgendered is considering sex reassignment surgery cosmetic or elective, because to transsexuals these procedures are necessary. Partly because of this, these surgeries, which cost anywhere

from \$5,000 to \$80,000, must often be paid for in cash in advance, putting them beyond the reach of many transgendered people.

**Christine Tayleur, member of Transgender Nation and board member of Community United Against Violence**

Ms. Tayleur, who has been working on behalf of the gender community for nearly ten years, described the state of social services for transgendered people in San Francisco as "abysmal."

The shelter system for homeless people, she said, is bad enough, but it is even worse for the transgendered homeless. The Episcopal Community Service, which operates several shelters, requires transgendered people to get medical documentation, psychiatric forms, or validation from another member of the community, something they do not require of non-transgendered people, before they can stay in a shelter. The manager of one center has expressed concern about men dressing up as women to get into the shelter, and a fear that transgendered women might rape non-transgendered women. As a result of this kind of discrimination, transgendered people often remain without shelter.

Ms. Tayleur said that the Department of Social Services frequently puts transgendered people through "extra hoops" and treats them with disdain. One woman was subjected to extensive verbal abuse, and only got an apology after filing a written complaint. She was asked to provide medical documentation to prove her sex. Ms. Tayleur added that transgendered women are regularly turned away from rape crisis centers and medical facilities. She asked that the Commission help transgendered people secure their civil rights.

**Camille, individual testimony**

Camille testified that she was thrown out of one City psychiatric clinic because she was transsexual, and out of another one when she complained that her therapist had forced himself on her sexually. She also said she was rejected by a rape crisis clinic for being a transsexual woman.

When Camille was six years old, she was given electric shock treatment against her will, and she spent years in a state hospital because she was a feminine child. She said that transgendered children are still incarcerated today, and that treatment includes electroshock, drugs, and genital wiring.

**Antonio, individual testimony**

Larry Brinkin stated that Antonio was ill and unable to testify, but will submit his testimony in writing. Antonio is a female-to-male father of a ten-year-old girl, currently in a foster home, for whom he is fighting for custody. Antonio believes this is due to his transsexualism.

**Matt Rice, individual testimony**

Mr. Rice stated that he moved to San Francisco in 1991 when he was a "butch dyke." In the Market Street candy store where he worked, he was told by his gay male supervisor not to discuss his gender or identity with the customers but to respond to them as whichever gender they perceived him. He was frequently asked to leave the women's room, and finally decided to use the bathroom in the basement.

In March 1992, when Mr. Rice had begun identifying as a female-to-male, he was hired as a substance abuse recovery service provider. His gender was seen as a disability, and eventually he was fired.

Currently Mr. Rice works at a gay men's bar. When he asked his manager why he has not been promoted as quickly as other employees, he was told it was because he was a woman. When he said he was not, his manager called him a "freak." When Mr. Rice protested, his manager asked him if he had ever had sex with patrons of the bar; Mr. Rice said he had not. His manager said that until he became "sexually marketable" he could not tend bar.

Mr. Rice pointed out that women are often excluded from well-paying jobs simply because they don't dress in a manner that is considered socially appropriate.

He concluded by saying that he believes discrimination against transgendered people will not end with the passage of protective legislation, but that it will give people some legal recourse, and may create a safe environment for them to work in and to be who they are.

#### **Dawn Holland, individual testimony**

Ms. Holland shared her own experiences of being verbally and physically abused for being transgendered. She also told of a friend who was beaten to death, and that the police response had been to say she must have fallen off her high-heeled shoes. Ms. Holland said that she is sick and tired of living in a state of fear, and urged the Commission to pass legislation that would not only protect the transgendered from discrimination in housing and jobs, but also from physical and verbal abuse.

#### **Victoria Schneider, individual testimony**

Ms. Schneider is a transgendered sex worker who shared her experiences of police harassment and assault. She said she was treated abusively during the process of being arrested and incarcerated for prostitution. Although she has filed charges with the Office of Citizen Complaints, she has received no response.

#### **Shelley Elvira Salieri, individual testimony**

Ms. Salieri identified herself as a transsexual woman who has been a civic advocate and pro bono legislative analyst for members of the Board of Supervisors. She serves on the Citizens' Advisory Committee of the San Francisco County Transportation Authority and is a candidate for election to the Board of Supervisors.



Ms. Salieri was a contributing author of Proposition L, which granted employment rights, protection and security to transgendered employees of the City and County of San Francisco. She has also drafted language for inclusion of the transgendered in the human rights ordinance. Additionally, she has participated in medical education programs of the University of California in San Francisco, where she familiarizes first-year medical students with transgenderism.

Ms. Salieri said that a major area of difficulty is interaction between transgendered people and government agencies, particularly the sheriff's and police departments. She suggested that all departments of the City and County of San Francisco include employee sensitivity training on how to deal with transgendered people. She suggested that one- or two-hour trainings be conducted by members of the transgendered community themselves, and that these should include history, psychology of gender dysphoria, and exposition on the nature of the transformative process.

**Lester Olmstead-Rose, Executive Director, Community United Against Violence (CUAV)**

Mr. Olmstead-Rose's agency works on preventing and responding to violence within and against the lesbian, gay, bisexual and transgender communities. The transgendered, said Mr. Olmstead-Rose, are targets of hate violence as much if not more than any other group. A significant number of these incidents, he said, are perpetrated by the police department.

To address these problems, CUAV began an outreach effort to transgendered people. They invited a transgendered person to serve on their board and wrote a strategic plan for soliciting input from the transgender community. As a result of these efforts, the agency is now able to adapt its services and respond to the needs of transgendered people.

#### **4. City and County Agencies**

**John Vera, Assistant General Manager, Department of Social Services, City and County of San Francisco**

Mr. Vera said that the Department of Social Services has a written policy requiring transgendered people to get a referral from a transgender agency before being admitted to the city's North of Market homeless shelter. He stated that this agreement had been made in consultation with four different transgender organizations.

Mr. Vera stated a desire to use recommendations that emerge from the hearings in shaping future policies within the department. He said that the department's services require positive identification, which can present problems for transgendered people, whose documents may specify a different gender identify from the one they are living under. He also said that restroom use is a problem in that clients in the waiting rooms express hostility about who uses them. He said the department is trying to correct these problems, and is looking to the community and the Commission for help in formulating policies.

**Dr. Barry Zevin, Department of Public Health**

Dr. Zevin echoed others' statements that transgendered people face serious discrimination when seeking health care. As a result, the community is underserved. He said that the Health Department is trying to rectify this by instituting a weekly transgender clinic, and by educating employees about the medical problems of transgendered people.

**Wendell Pryor, Director, Department of Human Resources**

Mr. Pryor introduced two staff members, Ms. Evelyn Hogan-Jackson, Director of the EEO, Affirmative Action Division of the Department of Human Resources, and Mr. Eugene Freeman, who interprets Civil Service Commission rules for the Department. He stated that he was not representing the Department.

Mr. Pryor gave a brief history and overview of Proposition L, which was passed in November 1993 and forbids discrimination against City and County employees on the basis of gender identity. Because of its implementation the department now has the ability to investigate complaints.

The EEO formally investigates 60 to 70 complaints a year. As of this date there had not been any complaints of discrimination on the basis of gender identity, but Mr. Pryor suspects that the cases simply haven't yet been filed.

Last year the Civil Service Commission created a Strategic Planning Rules Revision Committee to direct efforts towards revising civil service rules. Currently the department is reviewing their discrimination complaint and investigation procedure, and they welcome direction from the Human Rights Commission. The department is also planning to incorporate sensitivity and awareness training around the issue of gender identity.

**Deputy Chief Fred Lau, San Francisco Police Department**

Deputy Chief Lau, speaking on behalf of the Chief of Police and the San Francisco Police Department, stated a policy of zero tolerance for discrimination against transgendered people. The department, Deputy Chief Lau said, has undergone a learning process in relation to gay police officers; Sergeant Dennis, who was in attendance, has offered to help the department deal with training regarding transgendered people. Inspector Mike Kern from vice crimes was also present. Deputy Chief Lau introduced Sergeant Stephan Thorne.

**Sergeant Stephan Thorne, San Francisco Police Department**

Sgt. Thorne identified himself as a pre-operative female-to-male transsexual. He shared his fears about coming out as a transsexual, both on the job and to friends and family, and expressed amazement at the support he has received. He echoed an earlier statement that, unlike other oppressed groups, transsexuals are often unable to share their experience with family members.

When Sgt. Thorne decided to come out to the Police Department, he sought legal advice and was referred to Larry Brinkin at the Human Rights Commission. Prior to his discussion with Mr. Brinkin, Sgt. Thorne had not heard of Proposition L; when he was informed about it, he felt greatly relieved to know that he would have legal protection from harassment and discrimination on the job. He expressed his belief that it is important to expand this legislation.

Sgt. Thorne alluded to the case of Brandon Teena, who, like himself, came from a small town in Nebraska. When Mr. Teena was murdered for being transgendered, Sgt. Thorne felt that as a police officer he could not remain silent about the crime.

Sgt. Thorne pointed out that none of the health coverage offered to City and County employees covers transsexual medical expenses, and said that he has taken out a loan to cover the costs of his surgery. He stressed the need for insurance that will cover the medical needs of transsexuals.

Sgt. Thorne offered to assist in sensitivity training for members of the Police Department.

**Captain Veronica Keller, Facility Commander, Intake Facility, San Francisco County Jail No. 1**

Captain Keller expressed agreement with members of the transgendered community that they should not be subjected to harassment from the sheriff's department. She said that the department will be working with Ms. Salieri to develop sensitivity training about transgenderism for all department employees. She invited members of the transgender community to provide input and to make the department aware of any negative experiences they may encounter with the Sheriff's Department.

## **5. Services and Organizations**

**John Bartolome, Director of Social Services, Saint Anthony's Foundation, San Francisco**

Mr. Bartolome stated that during more than five years at St. Anthony's he has seen that homeless transgendered people are among "the poorest of the poor." St. Anthony's accepts transgendered people into their shelters without requiring any medical evidence or other criteria as proof of gender. Mr. Bartolome stated that transgendered people are among the most oppressed groups in the city. He recommended that the needs of homeless transgendered people be recognized and addressed so they can receive adequate and appropriate services.

**Edward Patterson, member of the Lesbian, Gay and Bisexual Substance Abuse Task Force of Community Substance Abuse Services**

Mr. Patterson said that three months ago his task force formed a team of representatives from the transgender community to develop protocol to insure that transgendered people would receive adequate substance abuse services in the city's drug and alcohol treatment centers. Because providers did not know how to accommodate someone who doesn't meet their gender identity expectations, transgendered people were not getting equitable treatment. When they do get into the system they are often mistreated, misdiagnosed or merely tolerated.

No numbers are available on how many transgendered people seek treatment. Intake forms report male-to-female transsexuals only, keeping female-to-males invisible and out of reach.

Mr. Patterson cited the case of a male-to-female who managed to get through a residential treatment program and now works in the recovery community as proof that solutions can be found. He stressed the need for education and training for staff and clients. He offered the resources of the task force to the Commission.

**Susan Stryker, representing the International Conference on Transgender Law and Employment Policy, Houston, Texas**

Ms. Stryker said that anyone may attend the annual conferences sponsored by her organization. These conferences address legal matters and public policy regarding transgendered individuals, and have become a networking hub for transgender activities around the world. They address employment, health care, human rights, civil rights, incarceration, family law, military law, personal identification, and civil disobedience. In each of these areas, said Ms. Stryker, transgendered people are subject to unequal treatment.

The conference has determined that:

- Retaining current employment or securing new employment during transition or after disclosure is the single biggest obstacle faced by transgendered people. Outlawing employment discrimination would reduce the number of transgendered people seeking public assistance or social services.
- Most transgendered people who identify as transsexual feel a need to alter their bodies surgically or hormonally, but these procedures aren't usually covered by insurance. They must, said Ms. Stryker, be included in health care reform.
- Ms. Stryker said that transgendered people have no guarantee of civil rights at any federal or state level anywhere in the United States. Title IX has been interpreted by federal courts as not pertaining to discrimination based on transgender status.
- Confining incarcerated pre-operative transsexuals with members of their former gender based on anatomy puts them in physical danger, and makes them more vulnerable to rape by other inmates and guards.
- Transgendered people are often unable to obtain identity papers with their new

gender status, and therefore face disclosure and discrimination.

- Family law judges consider transgendered individuals less fit to parent. Transgender status is considered grounds for divorce and sometimes prevents individuals from marrying.
- Armed services medical regulations explicitly forbid post-operative transsexuals from entering the military. Disclosure of transgender status almost always results in discharge.
- Cross-dressing is usually considered evidence of homosexuality.

Commissioner Lazam questioned Ms. Stryker as to state protection of transgendered people, noting that a previous speaker had said that there is such protection in Minnesota. Ms. Stryker said that to her knowledge there is no protection at the state level, although there is a municipal code in Minneapolis.

**Sue Kuyper, Director of Crisis Line Services, Women, Inc.**

Women, Inc. is an agency that serves battered women. Ms. Kuyper said that the battered women's movement has from its inception recognized a need for self-monitoring so as not to exclude any group from receiving services. She pointed out that isolation is a tactic used by batterers as a means of control, so when any victim is deemed invisible by society, the consequences can be severe.

Ms. Kuyper said that the number of women who have identified themselves as transgendered on the hotline and in support groups is small, and that she suspects such women are not revealing themselves for fear of repercussions. She urged the Commission to pass legislation that will protect transgendered people from violence and discrimination, and said that her agency is ready to help create services for the transgender community.

**Jelousy, Volunteer Coordinator, Brothers Network**

The Brothers Network is an HIV agency that teaches safer sex and risk reduction, and has a program that provides education around transgender issues. Jelousy urged the Commission to pass legislation in order to empower transgendered people so they will actively seek housing and employment without fear of being discriminated against.

Commissioner Fong asked if the Brothers Network focuses primarily on African-Americans. Jelousy replied that it focuses on African-American gay, bisexual and transgendered people.

Commissioner Fong asked if individuals who use the organization say they experience another level of discrimination due to being both African-American and transgendered. Jelousy replied yes, and added that many of their clients are indigent and come to the Network for referrals to shelters. She mentioned that transgendered

people often experience discrimination in food lines, where they are told to step out and wait to be served.

Commissioner Lazam asked Jelousy to talk about the discrimination faced specifically by African-American transgendered people.

Jelousy said that transgendered people are often ignored when they apply for services, and she suggested that perhaps if they were just gay or just African-American they would not receive such treatment. She said that service providers don't know how to treat transgendered people. For example, they aren't aware that asking someone "What are you?" is an inappropriate question, as opposed to asking which gender they identify as.

Commissioner Lazam asked how many clients the Network sees per month. Jelousy replied that they see approximately 10 to 15 transgendered people per month.

Commissioner Fong asked if the Brothers Network serves both male-to-females and female-to-males. Jelousy replied that they do, but that their focus is primarily male-to-females.

#### **Kiki Whitlock, Transgender Program Coordinator, Asian AIDS Project**

The Asian AIDS Project provides AIDS and HIV prevention education for the Asian and Pacific Islander (API) communities. The Transgender Program targets transgendered people. In the second year of its program, its mission is to halt the spread of HIV/AIDS and other STDs through street and bar outreach, client advocacy and peer counseling. The agency also provides information on health and related issues such as police harassment and employment discrimination.

Commissioner Lazam asked for an estimate of the size of the API transgender community. Ms. Whitlock replied that every month the agency sees approximately 30 clients.

#### **Sherri Webb, Transgender Counselor, Tenderloin AIDS Resource Center**

The Tenderloin AIDS Resource Center hires transgendered people to work with other transgendered people. Ms. Webb facilitates two groups per week, one a support group and the other educational. She also provides individual counseling for clients and family members. All her clients are HIV positive. She said that her agency is overworked and the community is underserved.

#### **Jane Kamper Bentley (Jim Bolig), Secretary, Educational TV Channel (ETVC)**

ETVC is a social and educational organization of about 450 people, some of whom are transsexuals. Most are male-to-female cross-dressers. Many are married and have children. Ms. Bentley said she spoke for thousands of mostly white, predominantly straight, middle-class males--an unlikely group to be discriminated against, but their status as cross-dressers makes them a target. Ms. Bentley told

about Helene in Idaho, whose neighbors vandalize her property and threaten her for being a cross-dresser, and of John, a Navy lieutenant who was discharged when his estranged wife told his commanding officer he was a cross-dresser. Because of such persecution, said Ms. Bentley, few cross-dressers will testify at these hearings.

**James Green, Director, FTM International**

FTM is an international, information and networking group for female-to-male cross-dressers and transsexual men whose monthly meetings are held in San Francisco. The organization has approximately 500 members.

Mr. Green told the commission that the lives and concerns of female-to-males are shrouded in secrecy, and that fear often prevents them from finding proper medical treatment or achieving economic prosperity. Fear also keeps them separate, and the resulting isolation means that they must find the services they need through trial and error.

In existence since 1987, FTM connects female-to-males to one-another, and works to overcome ignorance, shame and prejudice. Members range in age from their 20s to their mid-60s and come from every race, profession, religion and sexual orientation.

**Crystal Erwin Holland, Transgender Nation**

Ms. Holland identified herself as a transsexual. Transgender Nation of San Francisco is a group of transgendered and non-transgendered activists who are working to prevent transphobia through direct political action. Ms. Holland stated that she demands the right to love who she wants to love, to work where she wants to work, and not to be harassed.

**Rachel Timoner, Lavender Youth Recreation and Information Center (LYRIC)**

LYRIC provides social, recreational and support services to lesbian, gay, bisexual, transgendered and questioning people under the age of 23. Ms. Timoner coordinates their youth talkline. Since its inception a year ago, the talkline has received more than 10,000 calls, of which an estimated 15 to 20 percent have been from transgendered or gender-questioning young people. These callers express isolation and a desire to connect with others who will understand what they're going through.

Ms. Timoner said that when the talkline was first instituted, the number of transgendered callers presented a problem because LYRIC could not find a single agency that provided services specifically for transgendered young people — including within its own organization. Because of this, LYRIC began developing programs specifically targeted to transgendered youth.

Commissioner Fong asked Ms. Timoner if the hotline is an 800 number or a local 415 number. Ms. Timoner replied that the hotline has two numbers, one local and another 800 number that serves the nine Bay Area counties. They also have a

TDD number for deaf and hearing impaired callers. Callers come almost entirely from Northern California.

## **6. Transgender Communities of Color**

### **Louise Conner, individual testimony**

Ms. Conner identified herself as a post-operative transsexual. She shared her experience of growing up in a middle-class family in Alabama, always feeling different. She finally felt better after moving to San Francisco and undergoing sex reassignment.

Ms. Conner said that she works as a nurse in San Francisco. She also said that she has been called names and has been discriminated against in bars.

### **Yvette Robles, individual testimony**

Ms. Robles said that she grew up in a small town in Texas feeling like a girl and was told that this was wrong. She felt that her mind and heart were in the wrong body and although she tried to change, she finally realized this would never happen. Eventually she began to live full-time as a woman.

Ms. Robles works at the Tenderloin AIDS Resource Center where she says she is accepted and supported, but she pointed out that it is highly unusual for a Latina transgendered individual to have a job where she can be open about her gender. She added that Latina/o transgendered people are in need of jobs, housing and health care.

### **Ben, representing Asians and Pacific Islanders**

"Ben" stated that he is using this pseudonym in order to preserve his anonymity. He emphasized a need for services for transgendered Asians and Pacific Islanders. These include quality medical care, and an emotional support system that extends to non-transgendered people, because, particularly in the Asian and Pacific Island cultures, family ties are sometimes the only source of support.

Ben reiterated problems with discrimination in employment.

### **Max Wolf Valerio, representing Native Americans**

Mr. Valerio identified himself as half Black Foot Indian and half Chicano. He said that his tribe has a tradition of women living as men who were respected and honored. These individuals hunted with the men and took wives. Mr. Valerio said that while many Native American tribes considered transgendered people shamans, since European colonization most don't even remember this tradition, and can be just as prejudiced as the rest of the population. Mr. Valerio's mother, for example, told him never to go back to the reserve (Canadian for reservation) or to contact his relatives.



## **7. Youth and Families**

### **Jordan Linguist Moore, individual testimony**

Mr. Moore told the Commission that he has been cross-dressing since he was five years old, and that for most of the time he felt something was terribly wrong with him. He thought he was the only boy in the world who wanted to wear women's clothing, and had no one with whom he could discuss his feelings.

He said that cross-dressers have existed throughout history, particularly among Native Americans. More than 50 percent of all transsexuals have attempted suicide. Gender questioning youth are at a higher risk for suicide, unsafe sex, and HIV transmission. This points to a need for materials and staffing of schools that are sensitive to the needs of gender questioning youth.

Commissioner Lazam asked if Mr. Moore cross-dressed in school and if so how people responded to him. Mr. Moore replied that he cross-dressed once in a high school play and was subsequently laughed at and shunned. Commissioner Lazam asked if this occurred in San Francisco, and Mr. Moore replied that this happened in Albuquerque, New Mexico.

### **Ginny Knuth, Partner of a Transgendered Person**

Ms. Knuth has lived with a transgendered partner for over ten years, and has facilitated support groups for significant others. She identified herself as a genetic woman who is not gay, bisexual or transgendered, and who became disabled a year ago when she lost her leg to diabetes. Her male partner is a transvestite.

Ms. Knuth said that wives, partners and children experience as much fear and discrimination as do transgendered people. They face employment discrimination and fear physical attack. Her house, for example, has been defaced with epithets. She urged the Commission to grant the right for transgendered people and their families to live in peace.

At this point Commissioner Rynerson requested that Mr. Valerio return to the podium. He asked Mr. Valerio to recommend any books or publications concerning the position of transgendered people in Native American cultures. Mr. Valerio suggested *Spirit in the Flesh* by Walter L. Williams; *Zuni Man-Woman* by Will Roscoe; and the work of Beverly Hungry Wolf.

Commissioner Davis requested time to make a comment before leaving, and remarked that the quality of the testimony had been extraordinary. She said that her awareness of transgendered issues had been heightened, and her education broadened.

Mr. Brinkin acknowledged the job being done by the sign language interpreters. The scheduled speakers segment concluded and the proceedings moved into the public testimony segment.

## **8. Public Testimony**

### **Mark Gilpin, individual testimony**

Mr. Gilpin is the owner of the Mother Lode, a bar where transgendered people gather. He stated that he specifically opened the Mother Lode for the purpose of providing a community space for transgendered people.

Mr. Gilpin said that he has spent a year-and-a half and \$187,000 trying to expand his business to another location. The City and County of San Francisco, the Police Department, and the Board of Permit Appeals placed 11 conditions on his establishment before it would grant him a license, many of which are not normally imposed on establishments that cater to the non-transgendered. Ultimately the transfer of premises was denied, said Mr. Gilpin, because his bar caters to men who cross-dress.

### **Tasha Lunna Thompson, individual testimony**

Ms. Thompson identified herself as a 42-year-old intersexed person who was exposed prenatally to low gamma radiation. She said that she has excess chromosomes and some internal female reproductive organs. She lives at the Episcopal Sanctuary where transgendered women are confined to one bathroom and may only shower during proscribed periods. Ms. Thompson said that she has experienced many other kinds of discrimination as well.

### **Anne Ogborn, individual testimony**

Ms. Ogborn shared her experiences of being harassed by the San Francisco Police Department. She said that police sometimes mark off an area within which officers enforce "every law they can think of." She said that they suspect every transgendered woman who lives in the Tenderloin of being a prostitute, and as a result transgendered women are frequently harassed simply for walking in the streets.

She related an experience when a shopkeeper slammed her against the wall and pulled down her pants "to see what a transsexual woman looked like." A similar experience occurred again when Ms. Ogborn was arrested for engaging in political activity: prison personnel examined her, also "to see what a transsexual woman looked like."

### **Donald Cline, individual testimony**

Mr. Cline quoted Martin Luther King, Jr. and John F. Kennedy to point out that we should not discriminate against anyone.

**Crystal Cota, individual testimony**

Ms. Cota identified herself as a transsexual lesbian and a single mother. She said that she faced discrimination from gays and lesbians.

Ms. Cota's daughter was ignored when she complained to school administration of discrimination. Ms. Cota expressed fear that by speaking out publicly she could lose her daughter, since she has no legal protection.

Ms. Cota said that nearly a year ago she was raped, and that the San Francisco Police Department refused to treat her as a woman. She said that an officer who witnessed the rape did nothing, and that though her perpetrator was arrested by BART police, he was charged with simple assault and released within 24 hours.

**Blair, individual testimony**

Blair has worked in the psychiatric field for 16 years and said he has witnessed a lot of discrimination against transgendered people. He pointed out that transgenderism is currently classified as an illness by the diagnostic manual (DSM-III-R). He said that he has always been a boy in a girl's body but has been told by psychiatrists that he is too feminine to be male.

Blair told the story of a high school friend who was a male-to- female transsexual. His father repeatedly beat him and called him a faggot, until the friend committed suicide. Blair stressed that this could happen to any transgendered person.

**Tyrrell Stanley, individual testimony**

Ms. Stanley identified herself as an astrophysicist who cannot find a job due to her transgenderism.

**Jennifer Plonka, individual testimony**

Ms. Plonka testified that many of her life decisions have been made out of fear of discrimination as a transgendered person. Recently she went through transition and is currently unemployed.

**Peacy Skiles, individual testimony**

Mr. Skiles identified himself as a student at San Francisco State University who wears "untraditional" male clothing. He said he would like to extend the definition of transgendered to include men who have long hair or wear earrings. He also thinks there should be a legal distinction between transvestites and transsexuals because, he said, this is not an issue of sexual orientation. He pointed out that short-haired women are not discriminated against as are long-haired men.

### **Jennifer Muir, individual testimony**

Ms. Muir cited a 1985 study showing that as a result of hormonal influences in utero the presence or absence of dihydrotestosterone would make the difference between having a male child or a male-oriented child who was female. This study also showed four brain sex centers--one for patterning, one for sexual identify, one for sexual orientation, and one for sexual equipment. According to the results of this study, any person whose neurology contains incongruencies between any two or more of these centers is transgendered. Some transsexuals may be incongruent, and this is diagnosed on the basis of determining the "best gender" for that individual. In true transsexuals there is no gender incongruity, only an incongruity between gender and body, and only the body can be changed if congruency is desired. The law, she said, which currently distinguishes only between genital types, should be amended.

### **Francis Vavra, individual testimony**

Mr. Vavra identified himself as a female-to-male cross-dresser with transsexual issues, saying that he alternates between being male and being female.

Mr. Vavra stated that he works for a company which provides benefits for domestic partners, but that the policy is different regarding transgendered people. Mr. Vavra said that he is on hormones and does not know how far he will go in his sexual reassignment. He is afraid to undergo transition on the job for fear of becoming unemployed.

He has been verbally bashed on the street, called a dyke when wearing a suit, and a faggot when wearing a mustache. He urged legal protection for the transgendered.

### **Dominique Leslie, individual testimony**

Ms. Leslie identified herself as female. She works as a recovery counselor for St. Anthony's Foundation. She referred to earlier testimony by Edward Patterson, who alluded to transgendered people who survive discrimination within the drug and alcohol programs, and said that she is one of those people.

Ms. Leslie applied for substance abuse services in 1988 and was denied acceptance to seven programs. She was finally accepted into a program, but was told she had to return to being male in order to receive services. Walden House denied her access to hormonal and psychiatric treatment for gender dysphoria. Ms. Leslie persisted, and finally succeeded in her recovery.

### **Kitty Litter Green, individual testimony**

Ms. Green identified herself as having been a transvestite since the age of five. She said that she is involved in lawsuits against Kaiser Hospital for abuses and violations perpetrated upon her body. Ms. Green sang a song before leaving the podium.

**Lisa Wells, individual testimony**

Ms. Wells has worked for a California publication for 20 years. She said that she was risking everything by giving public testimony. Ms. Wells said that she fought against her transsexualism until she finally realized that she had to be herself and decided to undergo transition. A year ago Ms. Wells confided in the personnel department at work about her psychotherapy and was told that transsexuals and transgendered people have no rights whatsoever. Ms. Wells added that there is widespread discrimination among health care insurers.

**Billi Goldberg, individual testimony**

Ms. Goldberg identified herself as a post-operative male-to- female transsexual. She is an AIDS treatment activist.

Ms. Goldberg stated that the City could enact anti-discrimination right now by telling transgendered people that they will not be discriminated against at AIDS treatment centers such as San Francisco General Hospital and UCSF, which are funded by public monies.

**Paul Haines, individual testimony**

Mr. Haines is involved in a relationship with a transgendered woman. He stated that this relationship has opened his life to many wonderful people, but has also made him aware of the severe discrimination against transgendered people. He and his partner would like to adopt children, but are afraid they will not be allowed to do so. He urged the Commission to adopt legislation protecting the rights of transgendered people.

**Tommy Morina, individual testimony**

Mr. Morina identified himself as a gay male cross-dresser. He has been forced to cut his hair in order to keep his job and has experienced other kinds of discrimination as well.

**Rachel Lane, individual testimony**

Ms. Lane said that she objected to the use of terms such as post-op and transvestite. She said that the labels associated with gender are based on false categories arising from the absoluteness of the labels "men" and "women," and that absolute categories are an illusion.

**Karen Mainenti, individual testimony**

Ms. Mainenti identified herself as a gender challenged person. She stated that she does not know what caused her gender dysphoria, but that after years of suppression and fear she is finally happy now that she accepts herself as a transgendered person.

She has been denied acceptance into her partner's medical program as his spouse. She asked for the Commission's help in fighting this kind of discrimination.

**Jennifer Woodward, individual testimony**

Ms. Woodward identified herself as a member of the community of human beings and asked to be called a woman. She is a computer instructor at City College. She reiterated concern about the labels being used to describe people. She urged that any legislation set an example for proper and respectful use of language. She said she also hopes that the legislation will be tied to hate crimes and suggested that a survey be conducted to collect claims of discrimination.

**Elcy Arnold, individual testimony**

Ms. Arnold identified herself as gay. She is a native of San Francisco. She said that she is very happy since coming out of the closet and hopes the Commission's work will encourage others to come out of the closet as well.

**Elise Russell, individual testimony**

Ms. Russell identified herself as a transsexual and stated that she is one of the very few fortunate ones who has not been abused or battered. She worries, however, that this could change at any time, given that transsexuals have no legal protection.

**Victoria Radalta, individual testimony**

Ms. Radalta shared her experience of being physically and verbally abused by a barroom bouncer in San Francisco. She said that she is embroiled in legal problems because of resisting arrest connected with this incident.

**Veronica Register, individual testimony**

Ms. Register has lived in the Bay Area all her life. After undergoing surgery three years ago, she thought she would have to remain invisible as a transgendered person, but when she discovered the group Transgender Nation she felt empowered. She stated her availability to help other transgendered people.

**Lauren René Hotchkiss, Outreach Co-Chair of ETVIC**

Ms. Hotchkiss spoke of losing her marriage and her job due to her transgenderism. When looking for a new job she encountered insidious discrimination that was not provable, and it took her a year-and-a-half to become re-employed.

**Loren Cameron, individual testimony**

Mr. Cameron identified himself as a transsexual man. He is a photographer whose subjects are the transsexual community. His exhibit, "Our Vision, Our Voices, Transsexual Portraits and Nudes," is an educational exhibit. He invited everyone to come see it.

**Rachel, individual testimony**

Rachel identified herself as a genetic male. She stated that she has been physically harassed for her transgenderism and hopes that legal support will offer protection in the future. Rachel told about her relationship with her father, who has removed her from his will and cut her out of the family. Rachel also expressed fears for the future of any children she might have because of prejudice against transgendered people.

**Stephan Thorne, individual testimony**

Mr. Thorne stated that he wanted to address the Commission a second time in order to raise the issue of children of transgendered people. He said that he has friends who have lost custody of their children due to their transgendered status. Mr. Thorne said that by helping transgendered people the Commission will help the people who love and need them as well.

(end of oral testimony)

Commissioner Lazam adjourned the public hearing at 9:00 p.m.

## Written Testimony

### **Dr. Sandra Hernandez, Director, San Francisco Health Department**

Dr. Hernandez submitted testimony recognizing the unique difficulties transgendered people experience when seeking health care. She acknowledged that more work must be done to ensure transgendered people a safe and supportive place to get medical care, and described the various programs within the health department that attempt to address their needs. These include the Transgender Clinic at the Tom Waddell Clinic, a transgender self-help group at the Tenderloin Self-Help Center, and the Center for Special Problems.

### **Leo O'Farrell, Senior Supervisor** **Department of Social Services, City and County of San Francisco**

The Department of Social Services supplemented its oral testimony by submitting a copy of its policy regarding transgendered individuals who seek shelter at the North of Market Multi-Service Center. The policy states that all transgendered people applying for shelter must provide a referral from one of several agencies serving the transgendered and that a transsexual woman must be living full-time as female in order to be so classified.

### **Camille, individual testimony**

Camille supplemented her oral testimony with a written statement that said her gender confirmation surgery took place in a garage on Lombard Street because back when she had the procedure transsexuals were not permitted in hospitals. She attached to her testimony suggestions for improving the lot of transgendered people within the mental health system of San Francisco.

### **Carrie Drake, individual testimony**

Ms. Drake saw an announcement about the hearings and submitted a lengthy letter discussing discrimination by the gay community against transgendered people. She writes that she has had problems working within the Department of Health, apparently with agencies that serve the gay male population. She has filed claims of sexual harassment that were later perceived to be claims of discrimination based on her transsexualism. Ms. Drake writes that these experiences have caused her mental anguish.

### **Roberta (Bobbi) Dunne, individual testimony**

Ms. Dunne supplemented her oral testimony with a written statement detailing the discrimination she has experienced in the field of sheetmetal construction. Briefly: when she began her transition from male to female, Ms. Dunne was called gay and suspected of having AIDS. Eventually she was laid off, and a short time later was told that she might lose part of her pension. She received a new insurance policy which excluded transsexualism from coverage.



In trying to combat these injustices, Ms. Dunne could find no legal recourse. The U.S. Equal Opportunity Commission wrote to Barbara Boxer, whose assistance Ms. Dunne had requested, stating that it could not intervene on Ms. Dunne's behalf because there is no Federal protection for transsexuals. At this point, writes Ms. Dunne, she has been reinstated on a part-time basis and her pension is secure, but her insurance coverage is still to be determined. The conditions of her rehire are that she not talk about her personal or private life at work, and that she keep her hair tied back (for safety). She has hired an attorney and filed discrimination complaints with the Commission.

### **Dianna Inmon, individual testimony**

Ms. Inmon, having seen notice of the hearings in the newspaper, wrote to say that she believes a person who changes sex is going against the laws of nature, and adds that gay people are sick. Ms. Inmon bases her thesis on the fact that homosexuals, like heterosexuals, become bald. She states that this proves sexual preference derives from mental rather than glandular sources.

### **Gianna Eveling Israel, Counselor, Center for Special Problems**

Ms. Israel is a counselor at the Gender Identity program of the Center for Special Problems in San Francisco. She writes that one of the main reasons people seek her services is abuse. Many of her clients have encountered harassment and violence as well as discrimination in housing and employment. Ms. Israel cited many examples of discrimination, including: a 21-year-old transsexual who was slapped and threatened on the street and could get no help from police; a 26-year-old transsexual with excellent secretarial skills who was refused employment specifically because her employer felt his gay male clientele would not accept her; a 38-year-old transgenderist who was refused service at a restaurant; and a 24-year-old transsexual who was thrown out of a Castro Street store for being "flamboyant."

Ms. Israel pointed out that discrimination, harassment and violence against transgendered people goes unrestrained legally or socially within the City and County of San Francisco. She urged the Commission to enact legislation specifying "Gender Identity and/or Transgender individuals" as a protected class; to specify that this legislation protects against discrimination in public and private industry and businesses, housing, medical and mental health care, and social services; and that it initiate a mandate that public health services provide specialized medical and mental care and social services to the transgendered population. Ms. Israel attached a paper explaining gender dysphoria that included various profiles of transgendered people.

**Marie Kochaver, individual testimony**

Ms. Kochaver writes about dress codes on her job, stating that unnecessary directives have affected her emotionally. She attached a copy of the directive and recommended the banning of gender-separate dress codes in employment and promotion practices. Ms. Kochaver also attached a paper by Sandy Bernstein, who is writing a book about women who wear men's clothing, entitled "A Crossdresser's Closet: A Different Kind of Coming Out." In this paper Ms. Bernstein discusses her reasons for and feelings about dressing in male clothing.

**Dominique Leslie, Transgender HIV Services Coalition**

The Transgender HIV Services Coalition provides education and advocacy assisting transgendered individuals and the agencies who serve them. Ms. Leslie wrote that she has witnessed and experienced many instances of discrimination against the transgendered. She points out that many landlords refuse to rent to transgendered people; that transgendered people are often told there are "no programs for the transgendered at our facility" by health care centers; and that substance abuse recovery and other inpatient programs often require a transgendered person to live in the role of their "genetic" sex. Ms. Leslie reiterated the complaints expressed by many speakers that transgendered people are targets of abuse and violence, are denied service, face child custody and visitation problems, and are barred from using bathrooms, gyms, and dressing rooms. She recommended that the Commission pass anti-discrimination legislation and mandate that public agencies institute education and sensitivity training. She also recommended that transgendered people be eligible for SSI benefits under disability laws.

**Lisa M., individual testimony**

Lisa M. submitted written text describing her experience. She is a pre-operative male-to-female transsexual who is on hormone therapy but works as a male in order to save money for sexual reassignment surgery.

Ms. M. stated that she always knew who she was but felt that it was sinful. Because of her shame, Ms. M. tried to hide her transsexuality and buried herself in a career. A year ago Ms. M. told her Employee Assistance Officer and her Affirmative Action program that she would be undergoing transition. She was informed that executive orders outlawing discrimination did not apply to transsexuals, and that if the person in transition is deemed a "disruptive presence" termination can be immediate.

Ms. M's area of expertise is in health insurance claims. She quoted from a group member policy plan for Take Care in which sex changes are explicitly excluded from coverage. This is standard for most health plans throughout California and the nation. Exclusions for transgendered people do not end with sex reassignment surgery, but extend to "any other treatment or studies." Such language would deny access to counseling services for gender identity problems. Therefore, anyone with a psychiatric diagnosis of transsexualism is excluded from coverage for treatment for his or her diagnosis.

Ms. M. was unable to obtain hormone treatment from one doctor who was unsure about insurance coverage. Her insurance carrier, to whom she and her employer have paid thousands of dollars, said they were not responsible for any "treatment or studies relating to sex transformation." Ms. M. now obtains her hormones from Mexico.

Ms. M. pointed out that part of the reason insurers exclude sex transformation is that they classify it under "cosmetic procedures," and most insurance does not pay for cosmetic procedures. She stated that the average cost for sex reassignment is about \$40,000 for male-to-females and about \$100,000 for female-to-males.

### **Marilyn Robinson, individual testimony**

Ms. Robinson told the story of her rape. When the police were called, she states that they were initially supportive, but upon learning of her transgendered status they called her a prostitute, blamed her for the rape, and refused to prosecute the rapist.

### **Luanna Rodgers, M.A., MFCC**

To supplement her oral testimony, Ms. Rodgers submitted an explanation of gender dysphoria and ways in which the gender dysphoric are discriminated against. She also attached a letter which she sends to her clients' employers to help them understand the process their transsexual employees undergo [included in Appendix G].

### **Vince Sales, Executive Director, Asian AIDS Project**

Mr. Sales wrote that most of his Project's clients are immigrant and monolingual and face discrimination for these reasons as well as their transgendered status. Legislation to prevent discrimination will help his project do its work more effectively.

### **Peacy Skiles, individual testimony**

Mr. Skiles supplemented his oral testimony with a written statement in which he expounds upon his experiences as a cross-dresser. Mr. Skiles discusses the patriarchal root of oppression against cross-dressers and/or long-haired men. Also attached is a newspaper item about a requirement by Blockbuster stores that its male employees wear their hair a certain length, and that they not wear earrings.

### **Gail Sondegaard, Editor, Transsexual News Telegraph**

Ms. Sondegaard described the negative portrayal of transsexuals by the media. She said that our society is engaged in a war for freedom but that people are tired of fighting. She believes that adding transsexuals to the civil rights laws of San Francisco will show that San Francisco still takes freedom seriously.

(end of written testimony)

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## Chapter 4—Findings and Recommendations

This Chapter lists the findings and recommendations of the San Francisco Human Rights Commission as derived from the preceding public testimony.

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### Findings

The Human Rights Commission, having conducted a public hearing on May 12, 1994, to investigate discrimination against the Transgender Community, and having considered verbal and written testimony, hereby finds:

1. That the City and County of San Francisco, by legislation, policy and practice, has consistently valued diversity and tolerance and has worked to eradicate discrimination based on prejudice in employment, housing, and public accommodations.
2. That the term Transgender is used as an umbrella term that includes male and female cross dressers, transvestites, female and male impersonators, pre-operative and postoperative transsexuals, and transsexuals who choose not to have genital reconstruction, and all persons whose perceived gender or anatomic sex may conflict with their gender expression, such as masculine-appearing women and feminine-appearing men.
3. That gender identity is different from sexual orientation, and sexual orientation discrimination ordinances do not protect transgendered persons. Gender identity is the deeply felt knowledge of an individual that he or she is male or female; in transgendered persons, the gender identity and the anatomic sex may not be in alignment. Sexual orientation is not an indicator of gender identity: for example, a male-bodied person who is attracted to men and has a male gender identity is not considered transgendered; a male-bodied man who is attracted to women and who has a female gender identity which is expressed through cross-dressing and/or the desire to live full-time as a woman, is considered transgendered. It is the expression of gender identity that results in discrimination because that expression is perceived as conflicting with the expectations placed upon the individual solely because of the form of his or her body, particularly the genitals.
4. That actual and legal discrimination do currently exist in the City and County of San Francisco with regard to gender presentation and transgender or transsexual status or identity.

5. That existing laws and policies often undermine the dignity and privacy of, and do not include protections for, transgendered persons. The sovereign dignity of the individual and his or her right to privacy are cornerstones of American values.
6. That there are no accurate statistics reflecting the demographics of the transgendered population, but informal surveys of the membership of local transgender organizations and of local community service agencies indicate that there are approximately 6000 transgendered individuals in San Francisco. This number is increased substantially by including persons who may be perceived as transgendered and may therefore experience adverse discrimination.
7. That transgendered persons are present in every demographic group: every race, every class, every culture, every sexual orientation, and every epoch of recorded history includes evidence of the existence of transgendered persons.
8. That in the current social climate, persons who are perceived to be transgendered are considered by some as less than human and therefore assumed to be fair game for objectification, violence, and discrimination. Hate violence is perpetrated against transgendered persons as much as, if not more than, any other group.
9. That the efforts of the Human Rights Commission to address complaints involving transgendered persons are seriously hampered by lack of legislation to support and protect the basic human rights of transgendered persons. In some cases, the Commission has been successful in mediating resolution, but without the force of law the power of the Commission to compel humane treatment is severely limited.
10. That some transgendered persons may be driven to suicide in response to the severe discrimination they may face on a daily basis.
11. That many members of the transgender community are afraid to testify at public hearings for fear of retribution against themselves or their families, especially for fear of loss of employment and loss of child custody.
12. That transgendered persons are subject to severe discrimination in employment, housing and public accommodations.
13. That transgendered persons have experienced harassment by members of the San Francisco Police Department and the Sheriff's Department, and that it is possible that crimes against transgendered persons have not always been taken seriously by these agencies.

14. That transgendered persons have experienced great difficulty in obtaining medical and social services from hospitals, public health agencies, rape crisis centers, battered women's shelters, homeless shelters, and other organizations in San Francisco. Many of these providers treat transgendered patients and clients with great reluctance, sometimes pointedly harassing them and embarrassing them in waiting rooms, or condoning harassing behavior on the part of other patients and clients.

15. That representatives of some City and County agencies admit their employees are not uniformly educated about or sensitive to the needs of transgendered persons.

16. That the transgender community is often aligned with the Lesbian/Gay/Bisexual community, but still experiences discrimination within the Lesbian/Gay/Bisexual community and its institutions.

17. That both the news media and entertainment media tend to perpetuate stereotypes in their coverage or treatment of transgendered persons and issues. The ill-informed biases expressed in the media then become a sanction perpetuating discrimination.

18. That some transgendered women who are raped, battered, homeless, or otherwise in need of services, as well as transgendered men who require medical attention for female anatomy, are frequently denied services from women's support agencies based on their transgender status or identity. While some agencies providing services for women are working to educate themselves with respect to the transgender community and to combat the internal prejudices that lead to denial of services to the transgendered community, the Commission finds that greater effort must be made to eliminate discrimination based on transgender status or identity.

19. That transgendered youth frequently are unable to find sources of support for their difference. Feminine boys are often harassed and tortured by their peers and by their parents. Masculine girls are usually teased and/or ignored. Both boys and girls are called queer and left alone to traverse the difficult terrain between gender identity and sexual orientation. With no language to talk about their feelings, no social support, and little (if any) education about sex and gender, transgendered youth are at high risk for attempting suicide, being rejected by family or peers, becoming runaways, becoming subject to medical incarceration, getting stuck on the bottom rungs of the economic and social ladder in this society. One agency in San Francisco reported receiving nearly 2000 calls in the past year from transgendered or gender-questioning youth. These youth express deep isolation, the desire to connect with other youth who share their feelings, and a desperate need to escape harassment, abuse and rejection because of who they are.

The demand for transgender services is roughly 20% of the total demand for youth services at this agency which serves lesbian, gay, bisexual, and transgendered youth. This indicates that comprehensive gender-issues-related social services are necessary for the community-at-large.

20. That once an individual is labeled with the medical diagnosis transsexualism, insurance companies discriminate against them by excluding them from coverage for the necessary treatments and procedures and for any complications or conditions that may arise from these treatments and procedures.

21. That the economic hardship imposed on some transgendered (particularly male-to-female transsexual) persons due to discrimination in employment and in medical and insurance services frequently forces them to live in poverty or to turn to sex work to survive.

22. That the wives, partners, husbands, children, and other loved ones of transgendered people feel the intolerance and harassment shown by people out of ignorance just as deeply as does the transgendered person. They fear for their own safety and security as well as for that of the transgendered person they love and on whom they may depend economically.

23. That transgendered parents live with an often debilitating fear of the loss of custody or contact with their children, and may in fact lose that custody or contact solely because of prejudice. There is no evidence to show that transgendered persons as a class are not fit parents. This discrimination is arbitrary and may unnecessarily damage the relationship between parent and child.

24. That legislation to protect the transgendered community has been enacted in other locations: Minneapolis in 1974, Seattle in 1986, Santa Cruz in 1992, and Minnesota in 1993.

25. That Proposition L did give protection to the employees of the San Francisco City and County government against discrimination based on gender identity. Since Proposition L was passed in 1993 by a vote of the People of San Francisco, it is their will to protect transgendered persons.

26. That professionals who may serve the transgendered may also become stigmatized by their peers for their association with the transgendered community, and this stigmatization, or fear of it, often prevents attorneys, physicians, nurses, psychotherapists, etc., from treating or serving transgendered patients or clients. Attorneys, in particular, are reluctant to advocate on behalf of transsexuals whose surgical treatment has gone awry.

27. That the Human Rights Commission needs to work actively with employers, businesses, non-profit organizations, and public agencies to educate them as to the validity of the transgender experience and the value of cultural diversity in the area of gender, and to lead the way in demonstrating how the myths and prejudices surrounding the transgender community can be broken down to reveal the human beings who are struggling for their civil rights.



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## Recommendations

1. That the City and County of San Francisco develop and enact legislation amending the City's Human Rights Ordinances to add "gender identity" as a protected class with the intention of granting specific human rights protection to persons who are transgendered, and empower the Human Rights Commission to serve as the administrative agency to investigate and mediate discrimination claims that arise.
2. That the City and County of San Francisco budget for a position with the Human Rights Commission for the purpose of coordinating education and investigating and mediating claims, and that outreach be done to the transgender community in the hiring process for this position to ensure that transgendered applicants are considered.
3. That the Human Rights Commission ensure that its staff is adequately trained in transgender issues to enable them to perform transgender sensitivity trainings in San Francisco and to investigate and mediate discrimination claims.
4. That the Human Rights Commission produce and distribute information and resource materials for transgendered persons, their families, and their associates concerning their legal and civil rights.
5. That the Human Rights Commission serve as a clearing house for the general public and the media to contact for information regarding transgender education and human rights.
6. That the City and County of San Francisco conduct sensitivity training for its employees to demystify the subject of transgender experience and prepare both management and front-line employees to appropriately handle situations that may arise involving transgendered persons or the reactions of others to them.
7. That employees of the City and County of San Francisco are made to understand that discrimination against transgendered people is grounds for disciplinary action.
8. That the San Francisco Police and Sheriff's Departments conduct transgender sensitivity training for all personnel to ensure that transgendered persons are treated with respect, that their complaints are taken seriously and acted upon with reasonable dispatch, that if a transgendered person is detained or incarcerated he or she is housed in a manner which is consistent with the individual's gender identity, that his or her prescribed medication is provided, and that if the transgendered person's safety is compromised or at risk, he or she will be immediately protected and not subject to any physical or psychological harm perpetrated by other inmates or officers. Transgendered persons should have the right to be placed in protective custody upon request.

9. That the San Francisco Police and Sheriff's Departments use terminology that is appropriate to an individual's gender identity on departmental forms and police reports, and refrain from insulting or compromising the privacy and dignity of persons who have physical anomalies. It is respectful to ask a person whose gender identity is in question which gender they prefer; it is not respectful to ask "What are you?," or to make assumptions and enter descriptions of physical anomalies as part of a report, except when such anomalies are material to an investigation.

10. That the Office of Citizen Complaints conduct transgender sensitivity training for its personnel for the purpose of improving relations with the transgender community and improving the Office's ability to comprehend and process complaints filed by transgendered persons.

11. That the Department of Social Services conduct transgender sensitivity training for its personnel to ensure that transgendered persons are treated with respect, that their complaints are taken seriously and acted upon with reasonable dispatch, that their fitness as parents is not judged solely on the basis of prejudice against transgendered persons, and that transgendered clients do not endure physical or psychological abuse in the process of obtaining services.

12. That arbitrary gender-specific dress codes should not be imposed where they are not necessary: Employers approached by employees who are undergoing a gender transition should assist the employee by accepting their gender identity as expressed by their clothing and helping other employees to understand the transition process. In such instances in which there is a reasonable requirement for a dress code or for specific gender separation in facilities (such as locker-room dressing areas, etc.) then reasonable accommodations should be made so that the transgendered person's dignity and privacy are preserved, and the concerns of others are also considered. All of the parties should work cooperatively to address the issue.

13. That employers, businesses, and public agencies not restrict the access of transgendered persons to public restroom facilities that are appropriate to the person's gender identity. Like anyone else, transgendered persons using restroom facilities are primarily concerned with relieving and grooming themselves, and with ensuring their own personal safety.

14. That the Department of Public Health conduct transgender sensitivity training for all personnel to ensure that transgendered persons are treated with respect and dignity, that their complaints are taken seriously and acted upon with reasonable dispatch, that their physical health needs are not overlooked due to prejudice against transgendered persons, that transgendered clients and patients do not endure physical or psychological abuse in the process of obtaining services.

15. That the Department of Public Health continue to conduct in-service trainings covering the treatments, medications, procedures, and new medical, social, and psychological developments with respect to the transgendered community.

16. That medical service providers, including hospitals, clinics, and private practitioners, ensure that they and their support staff are adequately trained to handle transgendered patients, to protect their health, and to ensure that their programs eliminate all unnecessary forced disclosure of transgender status as a requirement for receipt of services, to ensure that transgendered persons are not disqualified from receiving services based upon transgender status or identity, or upon perceived transgender status or identity, and to ensure that transgendered persons are treated with dignity and respect regardless of what surgery or treatments they have had or have not had.

17. That the Department of Public Health and all other medical service providers refrain from treating transgendered patients and clients as if they are "on display" or otherwise objectify them or subject them to dehumanizing treatment, preserving the client or patient's dignity, privacy and confidentiality, and that they also require employees and contractors to comply with this non-discrimination policy.

18. That the Department of Human Resources ensure that its investigators are trained in transgender issues, publicize to City and County employees the rights of transgendered persons, and ensure that transgendered persons are not disqualified from employment, or discriminated against by any City agency, based upon transgender status or identity, or upon perceived transgender status or identity.

19. That the administrators of homeless shelters, battered women's shelters, substance abuse treatment programs, rape crisis centers, and other providers of social services in San Francisco ensure that their staff is trained in transgender sensitivity, that their program eliminates forced disclosure of transgender status as a requirement for receipt of services, and ensure that transgendered persons are not disqualified from receiving services based upon transgender status or identity, or upon perceived transgender status or identity.

20. That private employers in San Francisco add "gender identity" to their lists of protected classes and provide sensitivity trainings, institute hiring outreach to the transgendered community by advertising in local transgender community publications, and ensure that their transgendered employees, customers, and clients are treated with respect.

21. That the Lesbian, Gay, and Bisexual communities educate themselves concerning transgender issues and experience, and encourage their political clubs to more actively fight for transgender rights, and that Lesbian, Gay, and Bisexual businesses and organizations affirmatively encourage the participation of transgendered employees, clients and members.

22. That the transgender community continue and strengthen its efforts to educate others with respect to gender identity and its distinction from sexual orientation, and with respect to the empowering inclusivity that is uniquely the province of the transgendered.

23. That philanthropic and grant-making organizations and individuals consider funding transgender-related projects and social services.

24. That insurance companies acknowledge that transsexualism is a medical condition for which medical treatment is warranted and for which insurance coverage should be available. To serve as a model for other insurance carriers, the Commission recommends that the Health Services System Board modify the City Plan to cover transsexual treatment and procedures.

25. That while the Commission does not intend to recommend that all transgendered persons be regarded as disabled, the Commission does recommend that if a transgendered person does become disabled, for instance as the result of transsexual-related treatment or procedures, or for any other reason, that treatment for the resulting condition should be covered under the Americans with Disabilities Act, and the Commission recommends that the City lobby Congress and the State Legislature to amend federal and State disability laws accordingly.

26. That the District Attorney budget an increased amount for Community United Against Violence (CUAV) to enable its administrators to hire additional staff to provide outreach, education, and client services involving transgendered persons.

27. That public and private school administrators ensure that the condition of being transgendered is presented as another aspect of human biology that occurs naturally throughout society, and provide support services and/or referrals to transgendered and questioning youth so they do not have to suffer in isolation.

28. That professionals serving transgendered persons should be held to their professional ethics: it is one thing to avoid transgendered clients because of lack of expertise --it is discrimination to avoid them because of aversion to their condition. For example, attorneys should represent transgendered persons as they would anyone else, by seeking appropriate damages as they would in any other case in which the client has suffered injury. The Commission therefore also recommends that any State board or licensing agencies take the appropriate measures to prohibit discrimination against transgendered persons as patients or clients and as members of the associations.

29. That while there is a presumption of confidentiality by insurance companies, physicians, therapists, counselors, and social service agencies, etc., because of the potential consequences of involuntary disclosure of an individual's transgendered status it is doubly important that persons who are privy to such information about a client or patient should respect the privacy and confidentiality of transgendered persons and must not use knowledge of an individual's transgendered status to harm or control her or him.

30. That transgendered persons should not have to be certified by medical, psychological, or other service providers in order to enjoy the rights and privileges of society.

## **Appendices**

- A. Public Hearing Flyer
- B. News Release Announcing Public Hearing
- C. Public Hearing Agenda
- D. A Glossary of Gender
- E. The Transgender Umbrella (diagram)
- F. Letter Regarding On-the-Job Transition
- G. Newspaper Coverage of the Public Hearing
- H. Transgender Services and Resources
- I. Reference Bibliography

## Appendix A. Public Hearing Flyer

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### Appendix A. Public Hearing Flyer

# PUBLIC HEARING

SAN FRANCISCO HUMAN RIGHTS COMMISSION

## INVESTIGATION INTO DISCRIMINATION AGAINST THE TRANSGENDER COMMUNITY

### Public Testimony will be heard:

Date: Thursday, May 12, 1994  
Time: 4:30 - 8:30 p.m.  
Place: Board of Supervisors Chambers  
San Francisco City Hall, 2nd Floor

### Agenda:

Overview: Definitions, Current Legislation, & History  
Discrimination: Employment, Housing, Services, &  
Business Practices  
Policies and Practices of City Departments  
Agencies and Organizations Serving the  
Transgender Community  
Transgender Communities of Color  
Youth and Family Members  
Testimony from the General Public (sign up at the hearing)

For further information, please contact Larry Brinkin or Cynthia Goldstein at (415)252-2500.

American Sign Language interpreters and an FM Amplification System will be provided at the hearing. Assistive listening devices are available for use with 72 hours advance request. The Chamber is wheelchair accessible. The closest accessible BART station is Civic Center, 2 1/2 blocks from City Hall. Accessible MUNI line serving this location is the #42 Downtown Loop as well as the METRO stations at Van Ness and Market and at Civic Center. For more information about MUNI accessible services, call 923-6142. There is accessible parking in the vicinity of City Hall adjacent to Davies Hall and the War Memorial Complex. In order to assist the City's efforts to accommodate chemical sensitivity or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to various chemical based products. Please help the City to accommodate these individuals. To make arrangements or for information, contact Gail P. Roberts at (415) 252-2508 (voice) or (415) 252-2550 (TDD).

## Appendix B. News Release Announcing Public Hearing

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### Appendix B. News Release Announcing Public Hearing

City and County of San Francisco



NEWS RELEASE

Human Rights Commission

Office of Minority/Women Business Enterprise  
Office of Contract Compliance  
Office of Dispute Resolution

Edwin M. Lee  
Director

April 26, 1994  
FOR IMMEDIATE RELEASE  
For more information contact:  
Larry Brinkin or Cynthia  
Goldstein 415-252-2500

#### HUMAN RIGHTS COMMISSION ANNOUNCES PUBLIC HEARING ON DISCRIMINATION FACED BY THE TRANSGENDER COMMUNITY

The Human Rights Commission recently voted unanimously to hold a landmark public hearing regarding the discrimination faced by the Transgender community in San Francisco. The hearing will take place on Thursday May 12, 1994, in the Board of Supervisors' Chambers in City Hall, San Francisco, from 4:30 p.m. to 8:30 p.m.

This hearing is a direct result of the Transgender community approaching the Human Rights Commission with their concerns about the violence and discrimination that they face. While civil servants were granted protection against employment discrimination on the basis of gender identity through the recent passage of Proposition L, currently there is no legislation that protects individuals in the private sector on this basis. This results in rampant discrimination against Transgendered individuals. In employment, individuals are denied employment or are discriminated against when they are discovered as transgender or begin gender reassignment. They may be subject to harassment, demotions, or even termination. In housing, many landlords refuse to rent to



(415)252-2500



25 Van Ness Avenue, Ste. 800, San Francisco, CA 94102-6033

FAX (415)431-6764



TDD (415)252-2550



San Francisco Human Rights Commission

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transgendered individuals, or terminate their lease when they are discovered. They also allege discrimination in public accommodations, including unfair treatment by City departments, social and medical service providers, and homeless shelters. Transgendered individuals also are subjected to violence, including verbal attacks, physical assaults, and rape, which often go unaddressed by local police services.

After hearing the experiences of the Transgender community over the last year, the Commission, through its Lesbian Gay Bisexual Transgender Advisory Committee (LGBTAC) began to look at ways of addressing these concerns through the formation of the Transgender Task Force, chaired by Ms. Kiki Whitlock, the first Transgender member on the Advisory Committee. Ms. Whitlock states, "As a Transgender Advocate, I am proud that the Commission is addressing transgender discrimination with the seriousness it deserves. I see the public hearing as a first step in the City and County of San Francisco protecting the civil rights of the Transgender community."

At the public hearing experts will discuss other jurisdictions that have legislation that protects the Transgender community, and how it has been implemented. Transgendered survivors of discrimination in employment, housing, social services and medical services will speak on their experience. Transgendered individuals will also speak on their experiences with City agencies such as the Department of Social Services, Police Department, and Sheriffs Department. The hearing will also allow these city departments to discuss their policies and experience in working with the

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Transgender community, as well as providing recommendations in terms of policies and services. Agencies providing services to the Transgender community will address the present state of services to the community and the continued need for services.

According to Lucille Abrahamson, Chair of the Human Rights Commission, "This hearing will allow us to give a voice to a segment of the San Francisco community that historically has not been heard, and to expand human rights protections for all San Franciscans."

The hearing will also focus on recommendations for solutions to the problems presented. Recommendations might include asking the Board of Supervisors to pass protective legislation and having City departments adopt policies on serving the Transgender community.

Following the hearing, the Commission will prepare a report, which will consolidate the testimony and produce recommendations for solutions to the difficulties faced by Transgendered individuals.

####

## Appendix C. Public Hearing Agenda

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### Appendix C. Public Hearing Agenda

City and County of San Francisco



Human Rights Commission

Office of Minority/Women Business Enterprise  
Office of Contract Compliance  
Office of Dispute Resolution

Edwin M. Lee  
Director

Schedule for Public Hearing on the Investigation  
of Discrimination Against the Transgender Community

Board of Supervisors' Chambers  
City Hall, San Francisco  
May 12, 1994 4:30 p.m.

<u>Section and Speakers</u>	<u>Time</u>
<u>Introduction</u>	4:30 - 4:55 p.m.
Lucille Abrahamson- Chair of the Human Rights Commission (2 minutes) Robert Oakes - Mayor's Office (2 minutes) Edwin Lee- Director of the Human Rights Commission (2 minutes) Jeanette Lazam- Chair of the Public Hearing (10 minutes) Kiki Whitlock- Chair of the Transgender Task force (5 minutes)	
<u>Overview</u>	4:55- 5:10 p.m.
Kathy Jones- Definitions and Terminology (3 minutes) Edward Kaufman-Legislation in other Jurisdictions (2 minutes) Thalia Gravel- History of the Transgender Community (2 minutes) Max Wolf-History of the Transgender Community (2 minutes) Luanna Rodgers- Gender Identity (2 minutes)	
<u>Cases of Discrimination</u>	5:10- 5:50 p.m.
Larry Brinkin- Overview of Discrimination cases (5 minutes) (each speaker will present for 2 minutes each) Roberta "Bobbi" Dunne- Employment Discrimination Jim Tate- Housing Discrimination Kathy Hawley- Discrimination in Public Accommodations/Business Practices Shadow- Discrimination in Medical Services Christine Tayleur- Discrimination in Social Services Camille- Psychiatric Survivors Antonio-Clients of Dept. of Social Services Matt Rice- Discrimination in the Lesbian/Gay/Bisexual Community Dawn Holland- Violence towards the Transgender Community Victoria Schneider- Treatment by the Police and Sheriff's Depts. Shelly Elvira Salieri- Recommendations for the Police and Sheriff's Depts.	

(Over)



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City and County Agencies 5:50 - 6:20 p.m.

(Each agency will speak for 3 minutes)  
Department of Social Services- Mr. Leo O'Farrell  
Department of Public Health- Dr. Robert Prentiss  
Mr. Jeffery Jue  
Department of Human Resources- Mr. Eugene Freeman  
Police Department- Deputy Chief Fred Lau  
Sheriff's Department- Capt. Veronica Keller

Break 6:20 - 6:35 p.m.

Services and Organizations 6:35 - 7:05 p.m.

(each speaker will speak for 2 minutes)  
Lester Olmstead-Rose - Community United Against Violence  
John Bartolome- Homeless Shelters- St. Anthony's  
Staff-Tom Wadell Clinic  
Ed Patterson- Substance Abuse programs  
Susan Stryker- Legal issues  
Sue Kuyper - Woman Inc.  
Jealousy- Brothers Network  
Kiki Whitlock- Asian AIDS Project  
Sheri Webb- Tenderloin AIDS Resource Center  
Jane Kamper Bentley- ETVc  
James Green- FTM  
Crystal Erwin- Transgender Nation  
Rachel Timoner- LYRIC

Transgender Communities of Color 7:05 - 7:20 p.m.

(each speaker will present for 2 minutes)  
Louise Conner- African American Community  
Yvette Robles- Latino/Latina Community  
Ben- Asian/Pacific Islanders  
Max Wolf- Native American Communities

Youth and Families 7:20 - 7:30 p.m.

(each speaker will present for 2 minutes)  
Jordan Linquist Moore- Youth concerns  
Ginny Knuth- Families of Transgender individuals

Public Testimony 7:30 - 8:30 p.m.

Adjournment 8:30 p.m.

## Appendix D. A Glossary of Gender

This glossary was developed by Transgender Nation San Francisco, a transsexual/transgender activist group.

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### Appendix D. A Glossary of Gender

This glossary was developed by Transgender Nation San Francisco, a transsexual/transgender activist group.

#### A GLOSSARY OF GENDER

*Note—this is an evolving document, and while input from various segments of the community was solicited, some definitions may be incomplete.*

assigned gender at birth - the gender one is considered to be at birth, due to the presence of whatever external sex organs. Once this determination is made, it becomes a label used for raising the child in either one gender image or the other.

bigendered - meaning those who feel they have both a male and a female side to their personalities. Some "bigendered" people cross-dress (see), while other evolve into transsexuals and have sex-change operations.

Christine Jorgensen - wasn't the first to have sex-reassignment surgery, but was the first person to be widely known for having done so. News of her sex change in 1952 brought hope to many other transsexuals around the world.

clock(ed) - you are *clocked* when someone detects you are transgendered, as in the following example: an MTF TS is in public, living in the preferred female image, when someone calls out, "that's a man". This is embarrassing at the least, and devastating at the worst. The word *clock* apparently comes from the phrase, "read me like a clock". *Read (see)* is a synonym. Contrast with *pass (see)*.

clock my T - means I was clocked (see).

cross-dresser (CD) - someone who from time to time wears the clothes of the opposite (of their physical anatomical) gender, to relieve gender discomfort (see). Cross-dressers want to appear as "convincing" as possible as their other selves. A large subset of this group are men who enjoy dressing as women, and have otherwise ordinary marriages with wives who are not transgendered. Many say this term is preferable to *transvestite*, which means the same thing.



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cross-dress(ing) - wearing the clothes of the opposite (of your physical anatomical) gender.

cross-living - living full-time in the preferred gender image, opposite to one's assigned sex at birth, generally in preparation for a sex-change operation. This is a way of making sure a sex change is a sincerely desired goal, not just a passing fancy (or to put it another way, to make sure one is a *true transsexual*-see). 18 months of cross-living is enough to be absolutely sure one knows what the rest of one's life is going to be like, although frequently a year or less is plenty.

direction - which way one is crossing the gender line. MTF (see) is one direction, FTM (see) is the other.

drab - means DRessed As Boy, referring to men's clothes or in men's clothes, used mainly by gender benders and cross-dressers of both directions. Not used as frequently as the word *drag*.

drag - originally used [1] in Shakespeare's Globe Theatre to mean DRessed As Girl, referring to male actors (there were no actresses) playing female roles. Now [2] mainly used by gender benders and cross-dressers of both directions to mean women's clothes or in women's clothes. Also [3] refers to any specialized type of clothing as in, "my father walked in in full military drag".

drag queen - [1] a gay man who from time to time wears women's clothes, generally without attempting to be "convincing". [2] Some people who are more accurately referred to as MTF cross-dressers or transsexuals are sometimes called drag queens.

	N O T  T G	TRANSGENDERED			
		GENDER BENDER	CROSS DRESSER	TRANSSEXUAL	
				IN TRANSITION	POST- OP
HETERO					
GAY/LESB.					
BISEXUAL					

Note--not all possible categories are in the above chart

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estrogen - the "female" sex hormone. Actually, both men and women have estrogen in their systems, women just have a great deal more of it. Estrogen can be administered in both pill and injection form.

former transsexual - some say that (1) once a transsexual has completed surgery, they are no longer transsexuals. (Contrast with definition 2 of *transsexual*—see.) A compromise view might be that a former transsexual is (2) one who has completed surgery, and no longer wants anything to do with the transsexual community.

FTM - (1) female-to-male (transvestite or transsexual). Example: Billy Tipton. (It is more politically correct to use the abbreviation rather than the complete phrase, except to explain it to someone who doesn't know what FTM stands for.) Also abbreviated as F2M. FTM is also (2) the name of a group that is for FTM TS's and TV's.

full-time transvestite - same as definition 1 of *transgender* (see).

gender - there are perhaps five broad categories of gender: (1) physical anatomy, or sex organs, (2) secondary sex characteristics that develop at and after puberty, (3) fashion choices, (4) movement and behavior, and (5) the mind including gender identity. Sometimes we have to make it clear which of these we're talking about. *Gender* is also used as a prefix—see the following definitions.

gender assignment - see *assigned gender at birth*.

gender bender - anyone crossing the gender line who does not care about appearing "convincing". Example: a man wearing a dress, who looks like a man wearing a dress, and doesn't care if he does look like a man wearing a dress. *Drag queens* (see) are the major group within this category.

gender clinic - a medical clinic where transsexual health care services (at least hormones or hormone prescriptions) are made available. Counseling may or may not be part of the services available there. Surgery is usually referred out elsewhere.

gender community - the community of *all* cross-dressers, transsexuals, and gender benders, and anywhere they meet.

gender discomfort - like gender dysphoria (see), but not quite that bad. Occasional cross-dressing often provides sufficient relief.

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gender dysphoria - literally, it's being unhappy with the gender you are (physically anatomically, prior to changing anything). Pull-blown gender dysphoria syndrome is the same as transsexualism.

gender identity - the hard-to-define sense of "being" male or "being" female that is usually in accord with, but sometimes opposed to, physical anatomy. There is no clear agreement on how gender identity is formed, but most current theories say that gender identity is formed before birth.

gender image - the way one presents themselves to the world, as either male or female.

genetic - (1) refers to the chromosomal endowment of the individual, with emphasis on the sex chromosomes (XX in women and XY in men). This word is also used to mean (2) someone who is not transgendered, for example, "This is Georgiana, a cross-dresser, and her partner Lil, who is a genetic woman" or worse yet, "She's genetic." Since we are all genetically *something*, the use of *genetic* this way is both politically and technically incorrect.

Harry Benjamin, Dr. - an endocrinologist, sexologist, and gerontologist, and one of the first researchers in transsexualism. In 1966, his book *The Transsexual Phenomenon* was published, the first serious work on the subject.

Harry Benjamin International Gender Dysphoria Association (HBIGDA) - this is an organization of providers of transsexual services, including psychotherapists, endocrinologists, and surgeons. This group is the "establishment" in the field of sex change. They have published their Standards Of Care (see) regarding how to go about providing transsexual services, and to whom.

HBIGDA - Harry Benjamin International Gender Dysphoria Association (see).

in transition - (1) in the process of *transition* (see). (2) a synonym for *pre-op* (see).

incurable transsexual - any transsexual without hope of access to sex-reassignment techniques, including those living in the "third world" without western-style medical care available, and all transsexuals who lived and died before 1952.

intersex - born with the (full or partial) sex organs of both genders,



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or with underdeveloped or ambiguous sex organs. About 4% of all births are intersex to some degree. (This word replaces the politically incorrect *hermaphrodite*.)

**Irreversible** - no sex change can change a person 100% into the opposite anatomical gender. An MTF can never bear a child, an FTM can never sire one. While there is technically nothing to stop a post-op from "going back", the results are not the same as when one started—one ends up essentially like a post-op of the opposite direction. This is what is meant by *irreversible*, and is one of the reasons why many providers make transsexual services hard to obtain.

**manufactured transsexual** - some babies are born with (full or partial) sex organs of both genders, or with underdeveloped or ambiguous sex organs (see *intersex*). Usually, the doctor decides "what it's going to be", and performs "corrective" surgery without even consulting or getting the approval of the parents. A few of these babies grow up deciding "they took away everything I wanted, and left me with the parts I have no use for". These people are the manufactured transsexuals.

**metamorph** - an alternative word for transsexual, mainly used by those who are uncomfortable being called transsexuals. Not frequently used.

**MTF** - male-to-female (transvestite or transsexual). Example: Christine Jorgensen. (It is more politically correct to use the abbreviation rather than the complete phrase, except to explain it to someone who doesn't know what MTF stands for.) Also abbreviated as M2F.

**new man** - (1) post-operative FTM transsexual. Also sometimes used to mean (2) an FTM transsexual who is well along in the transition process.

**new woman** - (1) post-operative MTF transsexual. First used in a 1952 newspaper article in reference to Christine Jorgensen. Also sometimes used to mean (2) an MTF transsexual who is well along in the transition process.

**non** - a word used by transsexuals to mean a person who is not transsexual. Example: "Me? I'm not a non." Some say it is more correct to say "person who is not transsexual" instead.

**non-op** - same as nonsurgical transsexual (see).

5

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nonsurgical transsexual - transsexuals who seek sex reassignment through hormones and who cross-live, but stop just short of surgery. Some (1) have concerns about major surgery which is not always successful. Others (2) have been unable obtain the money necessary and have essentially given up on this final step (are "in limbo"). Yet others (3) feel they are complete without surgery and are the same as definition 1 of *transgender* (see). Others still (4) cannot have surgery due to special health problems, such as AIDS.

pass - means to be in your preferred gender image, and to be able to do so convincingly. Example—an FTM TV who looks like a man, not like a woman.

passing woman - (1) chiefly used in the historical sense to refer to a non-transgendered woman living as a man in order to have access to careers and lifestyles only available to men at that time. (2) Some historical figures who would today be more accurately called FTM transsexuals or transsexual men are sometimes referred to as passing women.

post-op - a transsexual who has had their sex-change operation(s), and now has the physical anatomy they desire.

pre-op - a transsexual who has not yet had their sex-change operation(s), but who is working towards it.

read - a synonym for clock(ed) (see). Examples: "I was read yesterday. I hope they don't read me today." This word has been mainly replaced by clock(ed).

sex-reassignment surgery (SRS) - sex-change operation.

Standards Of Care (SOC) - (1) a set of guidelines established by HBGDA (see) regarding the way transsexual services are made available. These guidelines are slanted towards making it difficult to obtain a sex change, under the idea that only the most qualified and most persistent should be allowed to proceed. Some feel these guidelines are too restrictive. (2) The Transgender Law Conference has issued an alternative Standards Of Care which amount to little more than signing an informed consent form.

testosterone - the "male" sex hormone. Actually, both men and women have testosterone in their systems, men just have a great deal more of it. Some testosterone is necessary to have a sex drive. Since it is destroyed by stomach acid, most supplemental testosterone is

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delivered via injections.

T-friendly - any organization or institution that is accepting of the transgendered peoples and their needs. Contrast with *transphobic* (see).

transgender (TG) - originally, this word meant [1] what are also known as full-time cross-dressers or nonsurgical transsexuals, people who live and work in the opposite (of their physical anatomical) gender continuously and for always. Now it also means [2] the group of *all* people who are inclined to cross the gender line, including transsexuals, cross-dressers, and gender benders together. This is the main way the word is used today, and is referred to as the "umbrella definition" as it covers everyone. A few use the word *transgender* as [3] a synonym for *transsexual*.

Transgender Nation (TN) - see the end of this document.

transgenderist - same as definition 1 of *transgender* (see). Those who mean definition 1 of *transgender* now tend to use *transgenderist* to avoid confusion.

transition - the process of changing sex, including hormones, cross-living (see), and finally surgery. A practical minimum for this process is about two years, but usually it takes longer, sometimes much longer.

transphobia/transphobic - the groundless fear and hatred of cross-dressers, transsexuals, and gender benders and what they do, and everything that results from this, from disrespect, to denial of rights and needs, to violence.

transsexual (TS) - anyone who [1] wants to have, [2] has had, or [3] should have a sex-change operation. (The third definition is for those in denial.) This word also includes [4] nonsurgical transsexuals (see). TS's want to appear "convincing" as their new selves. Dr. Harry Benjamin (see) was the first serious researcher in this area.

transsexual health care - hormones and sex reassignment surgery are the essentials. Many transsexuals believe counseling is *not* an essential item, but that it should be available to those who want it.

transsexual female/woman - an MTF TS. The medical literature tends to use the extremely demeaning term *male transsexual* to mean the same thing. Note that you can usually tell the preferred form is

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in use when the gender word comes *after* the "T" word.

transsexual male/man - an FTM TS. The medical literature tends to use the extremely demeaning term *female transsexual* to mean the same thing. Note that you can usually tell the preferred form is in use when the gender word comes *after* the "T" word.

transvestite (TV) - same as *cross-dresser* (see). Most feel that *cross-dresser* is the preferred term.

true transsexual - [1] one who will be happy living the rest of their lives in their new gender image, and will not regret going through transition, as opposed to one for whom a sex change is just a passing fancy. [2] If you want a sex-change operation, this is what you have to convince doctors you are. This easily becomes an obstacle in its own right, and has been called "jumping through hoops".

### Transgender Nation San Francisco

*This glossary was compiled by Transgender Nation San Francisco. We are a diverse group of transgendered and non-transgendered people united in anger and resolved to directly empower all transgendered people by direct political action. Our address is 584 Castro St. #288, San Francisco, California, 94114-2588, and we can be contacted at 415-586-6409.*

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**Appendix F. Newspaper Coverage of the Public Hearing**

1. San Francisco Examiner, May 11, 1994, page A-15: "Transgender issues subject for rights panel."
2. San Francisco Examiner, May 13, 1994, page A-1: "Bias sparks fear, call for help in transgender community."

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SAN FRANCISCO EXAMINER

★ Wednesday, May 11, 1994 A-15

## Transgender issues subject for rights panel

By Rachel Gordon  
OF THE EXAMINER STAFF

Activists looking to the San Francisco Human Rights Commission to protect transgender people from discrimination say a police sergeant's announcement that she will undergo a sex change is a milestone in their emerging movement for recognition.

"Transgender people face discrimination in medical care, housing, employment," said Kiki Whitlock, head of a transgender task force for the Human Rights Commission. The commission will hold a hearing Thursday on the problems facing local transgender people.

"The community has been silent for so long, but now we're starting to see more activism, more of a presence," Whitlock said Tuesday. "But we still have a long way to go."

Whitlock, who describes herself as a "transgendered post-operative transsexual bisexual woman," underwent a sex-change operation from male to female in 1985. Five years ago she became an activist fighting for the rights of other transgender people — an umbrella term encompassing cross-dressers, transsexuals and others — and now is transgender program coordinator for the Asian AIDS Project.

"Growing up I felt alone, like I was the only one who felt the way I did," said Whitlock, a former computer programmer in the Financial District. "There weren't role models. That has to change."

She said police Sgt. Stephanie Thorne's decision last week to go public with her transformation from a woman to a man "is a very positive step, a milestone, because here is someone on the police force, in the mainstream, who came out and expressed herself. And I think we're going to see more people doing the same thing."

The Human Rights Commission estimates that there are 3,000 to 5,000 transgender people in San Francisco.

Supervisor Terence Hallinan is expected to introduce legislation to provide protection for transgender people under San Francisco's anti-discrimination law. The move would allow the Human Rights Commission to investigate and



Sgt. Stephanie Thorne's action was hailed as "a positive step."

mediate complaints of discrimination. Transgender city employees were granted the protection last year.

At its meeting Thursday, the commission is expected to work on recommendations for handling transgender people who are jailed, enter city-funded residential mental health and substance abuse treatment programs or use The City's homeless shelters.

San Francisco, though often at the legislative forefront, is not in this instance. Seattle, Minneapolis and Canada already provide anti-discrimination protection for transgender people.

"There are some people in the transgender community in this city who are living their lives facing what appears to be horrendous amounts of discrimination that oppresses people in every imaginable way," said Cynthia Goldstein, discrimination representative for the Human Rights Commission. "As a city, we have the responsibility to address these issues."



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SAN FRANCISCO EXAMINER

★ Friday, May 13, 1994

## Bias sparks fear, call for help in transgender community

S.F. rights panel hears safeguard plea

By Rachel Gordon  
OF THE EXAMINER STAFF

Dawn Holland-Erwin starts her day in fear.

Crystal Cota hopes upon hope that no one will take her children away.

And Tyrrell Stanley, a former Navy aviator with 14,000 hours of flying time who holds a doctorate in astrophysics, cannot find a job.

The demon for each, they say, is discrimination against the transgender community — an umbrella term for people like themselves who have turned gender upside down. Included in the definition are transsexuals and cross-dressers.

They and dozens more transgender people and their supporters stood before the San Francisco Human Rights Commission on Thursday and asked for help.

Holland-Erwin, who is undergoing the transformation from male to female, says such action can't come soon enough.

"I've lived in a state of fear for so long, always looking over my shoulder, that I'm getting sick and tired of it," Holland-Erwin said.

Holland-Erwin, 31, has been taunted and hit by strangers.

"I hope you will see it in your hearts to pass some city legislation to not only protect us in housing and jobs, but also protect us from

[See GENDER, A-14]

◆ GENDER from A-1

### Transgender bias stirs call for action

the abuse, especially the physical abuse, that transgender people suffer every day," Holland-Erwin told the commission.

Lester Olmstead-Rose, executive director of Community United Against Violence, a victims advocacy group focused on the gay, lesbian, bisexual and transgender communities, said transgender people "are very often targets of violence against them — as much if not more than other people."

#### Fearing for children

But transgender people say their problems go beyond the threat of violence. Cota, a transsexual lesbian, has two children whom she fears she will lose at any time.

"We have absolutely no protection as a family," she said. "If anyone ever decides I'm not a good mom, the kids could be taken away."

San Francisco police Sgt. Stephan Thorne, who is undergoing a sex change from female to male, called for an end to the "ignorance and bigotry" directed at transgender people.

"We are an extremely marginalized community and we are here today to try to correct that," Thorne told the commission after receiving a standing ovation from the 100 or so in the audience.

The commission, which took no action, is expected to push for legal protections for transgender people under the City's anti-discrimination law. Supervisor Terence Hallinan has vowed to carry such legislation. Other cities — Seattle, Min-

neapolis and Santa Cruz — and Canada already have enacted such laws.

The Human Rights Commission estimated that there are 3,000 to 5,000 transgender people living in San Francisco.

#### City making accommodations

Last fall, San Francisco voters awarded anti-discrimination protection to transgender city workers. Hallinan's proposal would extend the anti-discrimination law into the private sector.

Several city agencies already have begun grappling with the issue. For example, the jails recently started making sure that preoperative transsexuals undergoing hormone therapy will continue their treatment while in custody. And the Department of Social Services has made special arrangements for transgender people using the homeless shelter at Polk and Geary streets. The Tom Waddell Clinic dedicates a half-day each week to care for transgender patients.

But at Thursday's four-hour hearing on the matter, representatives from all departments said they could do better — especially with sensitivity training for staff.

Stanley, the jobless astrophysicist, said special legal protections for transgender people were warranted.

She has undergone hormone treatment for the male-to-female transition. During this period, she said, potential employers take one look at her and show her the door.

"Until we are accepted as normal people, until we can walk down the street without fear," she said, "there will be those of us in the cracks who will continue to fight the battle for equality."



## Appendix G. Letter Regarding On-the-Job Transition

This letter from psychotherapist Luanna L. Rodgers, M.A., MFCC, was submitted as part of her written testimony. It is presented here because it succinctly outlines all the issues that employers and employees face with respect to an employee's gender reassignment, and as such it may be helpful to many readers of this report.

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### Appendix G. Letter Regarding On-the-Job Transition

This letter from psychotherapist Luanna L. Rodgers, M.A., MFCC, was submitted as part of her written testimony. It is presented here because it succinctly outlines all the issues that employers and employees face with respect to an employee's gender reassignment, and as such it may be helpful to many readers of this report.

Luanna L. Rodgers, M.A., MFCC  
*Psychotherapy - Consultation*  
1609 Church Street  
San Francisco, CA 94131  
(415) 641-8890

March 22, 1994

Dear Ms. [REDACTED],

I am writing concerning your employee, [REDACTED], who has been in the process of a gender transition to become fully and legally [REDACTED]. I am a licensed psychotherapist specializing in the area of gender dysphoria and transsexualism. I am a member of the Harry Benjamin International Gender Dysphoria Association, an organization of psychotherapist, psychiatrists, endocrinologists and surgeons who set standards of care for transsexuals in treatment and undergoing transition. I have been providing psychotherapeutic treatment to your employee, who I will henceforth refer to as Ms. [REDACTED].

For employees and personnel departments unfamiliar with gender transition it can be a surprising, and sometimes challenging, process to assist an employee undergoing gender reassignment with integration into the workplace in their new role. It can also be a thoroughly rewarding experience which can benefit the organization through the increased comfort and morale of the gender reassigned person. Many companies have successfully accomplished this task keeping several key points in mind.

First, transsexualism is a long-standing condition that has been with your employee throughout all of their adult, and most of their juvenile life. It has assuredly been with them throughout their period of employment with you. Therefore the gender reassigned employee is not changing in any fundamental ways specific to her job. That is, the employee will maintain the same technical and interpersonal skills previously exhibited and their core personality remains the same. Gender reassignment is the resolution of a long struggle toward personal identity, not the initiation of struggle.

Second, gender transition consists of aligning the physical and social role presentation of the transsexual individual with their psyche and gender identity. From an early age the male to female transsexual experiences the feelings and motivations of a female and wishes to be fully female. This is very different from the crossdresser or transvestite who seeks to wear the clothing of the opposite sex but does not identify as a woman and has no interest in changing

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their gender. For the transsexual who is female identified, acceptance within their new female gender role is extremely important to their self-esteem and adjustment. Within the work place management can assure successful integration of the newly gender reassigned individual by adhering to the following guidelines:

- 1) The employee is not isolated or treated differently than other same gender co-workers.
- 2) They are addressed by their new legal name and proper pronouns ("she", "her") are used.
- 3) Discrimination by co-workers or managers, should it occur, is not tolerated and is handled as would any breach of professional conduct in the work place.

Third, gender reassignment occurs before genital surgery. In California a transsexual undergoing hormonal reassignment is considered legally female for most purposes. Identification, such as drivers license can be changed from 'male' to 'female' due to hormonal reassignment prior to genital surgery. Standards of care require the transsexual individual to live in the new gender role for one full year before genital surgery. During this time the individual is expected to live, work and socialize in the new gender role. A letter from their treating psychotherapist or physician provides the information that these are prescribed activities, should any question arise while using restrooms, dressing rooms or gym facilities in the new gender role.

One issue that invariably comes up in places of employment with a gender reassigned individual is the use of bathroom facilities. Under no circumstances should the reassigned individual be forced to use the facilities of their former gender. This would be devastating to the self-esteem of the transitioned individual and injurious to their mental health. It would provide a constant reminder of their previous status and prevent full gender-role integration from occurring. It would demonstrate a lack of support and understanding by the company. It would also confuse and anger male employees forced to use facilities alongside a woman.

Many companies have the reassigned male to female individual use the women's facilities. The individual is endocrinologically a female. The genital status of the reassigned individual should not be a matter of public knowledge, nor would it be revealed in the course of prudent use of bathroom facilities. This also prevents the necessity of making a second change in procedure once genital surgery is completed.

Other solutions have included having the gender reassigned employee utilize a uni-sex facility, creating one if none exists. They may also share a bathroom with a limited number of female employees, such as those in their immediate department or unit, who know the individual

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and agree to support that solution. A female executive may also offer to share her facilities with the employee. Sometimes a seldom used women's facility is designated for use of the employee. What ever arrangement is made must be in keeping with the employee's new gender role and must not place an undue hardship on the employee in terms of distance or availability.

I hope you will find these suggestions useful in helping to coordinate a successful transition for your employee, Ms. [REDACTED]. Please feel free to contact me if I can be of further assistance.

Sincerely

  
Luanna L. Rodgers

## Appendix H. Transgender Services and Resources

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### Appendix H. Transgender Services and Resources

#### YOUTH AND YOUNG ADULTS

**Gender Minority Youth Project; (415) 641-8890**

Luanna Rodgers, MFCC; counseling for gender-questioning youth age 14-23 without ability to pay who are referred by an agency.

**Guerrero House**

899 Guerrero Street; San Francisco, CA 94110; (415) 550-4475  
Residential program for homeless young adults ages 18-21. Substance use counseling. Transgender sensitive staff.

**Larkin Street Youth Center**

1044 Larkin Street; San Francisco, CA 94109; (415) 673-0911  
Services to homeless youth ages 12-23; free medical care, street AIDS/HIV outreach.

**LYRIC (Lavender Youth Recreation & Information Center)**

3543 - 18th Street, #31; San Francisco, CA 94110; (415) 703-6150; 703-6152  
Social interaction and activities for transgendered, gay, lesbian, bisexual youth.  
Contact Crystal Irwin for more information.

#### ADULT SUBSTANCE USE

**ASAP (a project of the AIDS Health Project)**

Substance use services  
Contact Diane K. Haas for information at (415) 476-7853.

**18th Street Services**

217 Church Street; San Francisco, CA 94114; (415) 861-4898  
Outpatient program and support group.

**Tenderloin AIDS Resource Center**

187 Golden Gate Avenue, San Francisco, CA 94102; (415) 431-7476  
Substance use support group and individual counseling available to transgendered clients. For more information call Sheri Webb, Gender Advocate or Yvette Robles, Transgender Outreach.

**TS in Recovery**

2185 Market Street, Room B; San Francisco, CA 94114  
NA Group, Meets every Thursday at 6 p.m.



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**Walden House**

Detox for both HIV+ and HIV- clients; (415) 241-5575  
Day Treatment and Residential Intake (415) 554-1130

**HIV/AIDS**

**Asian AIDS Project (AAP)**

300 Fourth Street, #401; San Francisco, CA 94107; (415) 227-0946  
HIV/AIDS information and prevention education to the Asian/Pacific Islander (API) community, including transgender support. For more information contact Kiki Whitlock, Transgender Program Coordinator.

**Brother's Network**

625 O'Farrell Street; San Francisco, CA 94109; (415) 749-6714  
HIV/AIDS services for African American transgendered, gay and bisexual people. For more information contact Doris Robinson, Transgender Services Coordinator.

**GAPA Community HIV Project (GCHP)**

1841 Market Street, 2nd Floor; San Francisco, CA 94103; (415) 575-1525  
Direct services and case management, for Asian/Pacific Islander (API) HIV/AIDS transgendered clients. Call Tamisa A'awapuhi, Case Manager.

**Shanti Project**

525 Howard Street; San Francisco, CA 94105; (415) 777-CARE (2273)  
Direct services such as permanent housing to AIDS clients and case management. Call for information about transgender services.

**Tenderloin AIDS Resource Center**

187 Golden Gate Avenue, San Francisco, CA 94102; (415) 431-7476  
HIV/AIDS counseling, case management, and street outreach. For more information call Sherri Webb, Gender Advocate.

**SUPPORT GROUPS**

**Asian AIDS Project (AAP)**

300 Fourth Street, #401; San Francisco, CA 94107; (415) 227-0946  
Transgender Support (Rap) Group, targeting Asian/Pacific Islander (API), but open to all transgendered people. Meets the last Monday of every month at AAP. Facilitated by Kiki Whitlock and AAP Peer Leaders. For more information, call Kiki Whitlock at (415) 227-0946.

**Diablo Valley Girls**

Write: P.O. Box 272885; Concord, CA 94527-2885; (510)937-8432.

**ETVC**

P.O. Box 426486; San Francisco, CA 94142-6486; Hotline: (510)549-2665.  
Educational forums and social gatherings for crossdressers/transsexuals.

**FTM International**

Monthly meetings (in SF) for female-to-male transsexuals and crossdressers.  
Write for FTM Newsletter and meeting schedule. Voicemail: 510-287-2646.  
FTM; 5337 College Avenue, #142; Oakland, CA 94618.

**Pacific Center**

2712 Telegraph Avenue; Berkeley, CA 94705; (510)841-6224.  
Several different gender support groups. Call for times and dates.

**Rainbow Gender Association (RGA)**

Write: P.O. Box 700730; San Jose, CA 95170; (408)984-4044.

**Sacramento Gender Association (SGA)**

Write: P.O. Box 215456; Sacramento, CA 95821; (916)482-7742.

**Tenderloin AIDS Resource Center**

187 Golden Gate Avenue; San Francisco, CA 94102; (415)431-7476.  
Weekly transgender support groups meet every Wednesday and Friday,  
1-3 p.m. Individual counseling also available. For more information, call  
Sherri Webb, Gender Advocate.

**Transformations (sponsored by LYRIC)**

Meets each Monday, 6:00 - 8:30 p.m. Facilitated by Matt Rice and Crystal  
Irwin; ages 23 and under. Call for location (415)703-6150.

## **Health Clinics**

**Center for Special Problems (CSP)**

1700 Jackson Street; San Francisco, CA 94109; (415)292-2261.  
Medical care and counseling. It could take several months before receiving an  
initial intake interview because there is a long waiting list.

**Tom Waddell Clinic; Transgender Tuesday (TGT)**

50 Ivy Street; San Francisco, CA 94102; (415)554-2940; (415)554-2950.  
Transgender clinic is open every Tuesday, 5 - 8 P.m. Appointments preferred,  
but will accept walk-ins. Comprehensive medical care, including hormone  
administration and counseling. For more information, contact Mary Steffan,  
Unit Coordinator.

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## EMERGENCY SHELTERS

### Episcopal Sanctuary

201 Eighth Street (at Howard); San Francisco, CA 94103; (415) 863-3893  
Emergency housing for the homeless. For more information call and ask to speak with the Shelter Manager.

### Multiservices Center (North of Market)

1001 Polk Street (at Geary); San Francisco, CA 94109; (415) 292-2176  
Emergency housing for the homeless. For more information call the Center Manager.

### St. Anthony Foundation

121 Golden Gate Avenue; San Francisco, CA 94102; (415) 241-2600  
Emergency housing for the homeless. For more information call John Bartolome, Director of Social Services.

## OTHER COUNSELING

### Center for Special Problems (CSP)

1700 Jackson Street; San Francisco, CA 94109; (415) 292-2261  
Support group meets every Monday from 5:15 - 6:30. Call Dr. Donald Tarver for more information. Only for CSP clients.

### Gender Dysphoria Program, Inc.

1515 El Camino Real; Palo Alto, CA 94301; (415) 326-4645  
Counseling for transgendered people, especially for those transsexual candidates seeking gender reassignment surgery (GSR). For more information call Judy Van Maasdam.

### Gender and Self Acceptance Program

P. O. Box 424447; San Francisco, CA 94102; (415) 558-8058  
For information call Gianna E. Israel.

Transgender-sensitive private practice licensed therapists specializing in working with the gender community.

Barbara Anderson; San Francisco, CA; (415) 776-0139  
Rebecca Auge, Oakland, CA; (510) 835-9820  
Lin Fraser; San Francisco, CA; (415) 922-9240  
William Henkin; San Francisco, CA; (415) 923-1150  
Luanna Rodgers; San Francisco, CA; (415) 641-8890  
Anne Vitale; San Rafael, CA; (415) 456-4452

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## EDUCATIONAL BOOKS AND MAGAZINES

### **Chrysalis Quarterly**

c/o American Educational Gender Information Service (AEGIS)  
P.O. Box 33724; Decatur, GA 30033-0724

### **ETVC**

P.O. Box 426486; San Francisco, CA 94142-6486  
Newsletter, articles, and video tapes on transgender issues.

### **FTM Newsletter**

FTM; 5337 College Avenue, #142; Oakland, CA 94618  
Information for the Female-To-Male transgendered person;  
published quarterly. Other reference material available.

### **International Foundation for Gender Education (IFGE)**

P.O. Box 367; Wayland, MA 01778  
Publishes and distributes books on medical, legal and other  
transgender issues.

Revised 9/94  
by Kiki Whitlock



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**Note: There are additional appendices in the hardcopy not available online. If you're interested in these appendices, contact the Human Rights Commission.**