

ROUTLEDGE FOCUS

TRANS DILEMMAS

Living in Australia's Remote Areas and in
Aboriginal Communities

Stephen Kerry

ROUTLEDGE

Focus

Trans Dilemmas

Trans Dilemmas presents the findings of a three-year research project which examined the lived experiences of trans people in Australia's Northern Territory. The book argues that whilst trans people who live in remote areas experience issues which may not be distinct from those living in urban areas and the inner-city, these issues can be aggravated by geographic and demographic factors.

By conducting online surveys and in-depth interviews, Stephen Kerry brings to light the issues for transgender people which are compounded by living in sparsely populated, remote communities. Namely social isolation; maintaining relationships with friends, family, and partners; and the difficulties accessing health care. The book also includes significant findings on the experiences and treatment of Australia's trans Aboriginal people, also known as sistergirls and brotherboys. An analysis of first-person narratives by sistergirls and brotherboys reveals the racism within predominantly white trans communities and transphobia within traditional Aboriginal communities, which they are uniquely faced with.

Trans Dilemmas represents an important contribution to contemporary research into the lives of transgender Australians. It gives a voice to those transgender people living in the more isolated communities in Australia, which up until now, have been largely unheard. For students and researchers in Queer Studies and Gender Studies, this is valuable reading.

Stephen Kerry is a sociology lecturer at Charles Darwin University and is a queer activist, focusing his academic career on intersex and trans wellbeing. In 2015, Xie was keynote speaker at the Variant Sex and Gender, Religion, and Wellbeing Conference at the University of Exeter.



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First published 2018
by Routledge
2 Park Square, Milton Park, Abingdon, Oxon OX14 4RN

and by Routledge
711 Third Avenue, New York, NY 10017

Routledge is an imprint of the Taylor & Francis Group, an informa business

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British Library Cataloguing-in-Publication Data

A catalogue record for this book is available from the British Library

Library of Congress Cataloging-in-Publication Data

A catalog record for this title has been requested

ISBN: 978-1-138-50594-0 (hbk)

ISBN: 978-1-315-14675-1 (ebk)

Typeset in Times New Roman
by Apex CoVantage, LLC

**For Paniscus and Chakotay.
You are loved. You are missed.**



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Foreword

It is likely that trans people have lived in the Northern Territory (NT) for as long as there has been human occupation (Baylis, 2015, p. 12; Curtis, 2015, p. 37; Johnson, 2015, pp. 28–29). However, there has prevailed throughout most of the NT’s recorded history either uncomfortable silences or regrettable distortions about trans people (Dunn-Holland et al., 1994; Hodge, 2015).

In the early 1980s the first biographical profile appeared (Kibblewhite & Bonney, 1981, p. 32). The wider Territory community was beginning to acknowledge and respect trans Territorians. In the 1990s these sketchy details morphed into a growing presence as life stories and reports were published (AFAO, 1994; NTAC, 1998). The exigencies arising from a public health crisis meant the health profession needed to engage with trans people (Kerry, 2014; Lee, 1996). By the early 2000s trans citizens had acquired the skill-set for self-advocacy, and they began to articulate their experiences and needs to policy makers and service providers (Johnson, 2015, pp. 29–31). During the first years of the new millennium, trans people across the Territory have been exercising agency in their lives, advocating and negotiating directly to have their needs recognised and met (Curtis, 2015, pp. 45–47; Johnson, 2015, pp. 31–34; Sisters & Brothers NT, 2015).

Information about the lives of trans Territorians began to appear in the final decades of the twentieth century. The book *Did You Meet Any Malagas? A Homosexual History of Australia’s Tropical Capital* mentions the first Territorian known to identify as trans. In this book the Larrakia man Gary Lee recounts:

The first Aboriginal man to come out was actually one who came out full-on [during] the late-1950s . . . and he started wearing women’s clothes. The thing which was hard for a lot of people to take was that he looked very, very attractive. In fact, he . . . looked like a very attractive, sexy woman from all accounts. . . . He came out when he was quite young, about eighteen, which was a very brave thing to do, I would

think. He was working in Darwin and was here for a good ten years before he went down south and lived as a woman.

(Hodge, 1993b, p. 57)

The book *Darwinites: Portrait of a City* (Kibblewhite & Bonney, 1981) offers a snapshot of the second Territorian known to identify as trans. *Darwinites* presents profiles of residents who ‘make the character of our fair city’. Phylis Victoria Burns describes her achievements as ‘having gained the love and understanding of the people of Darwin. Also, being able to be accepted as a human being, and live a comfortable and healthy life’ (cited in Kibblewhite & Bonney, 1981, p. 32). She aspired to ‘create a better understanding between naïve people in relation to the other person’s outlook on life’ (cited in Kibblewhite & Bonney, 1981, p. 32).

Burns was born in Christchurch, Aotearoa, New Zealand, on 22 April 1943. She was working in Sydney when the hospitality entrepreneur John Spellman persuaded her to relocate to Darwin in the post-Cyclone Tracy 1970s. Spellman invited Burns to work as a DJ and entertainer in his renowned venue, Dix. He recalls:

We brought up Phylis . . . with the *Les Girls* show. Now she’s living in the community. She did the DJ-ing thing for Dix for me for years, and now she’s working for Telecom as a real girl – telephone switch bitch, yeah, Telecom directories enquiries officer. . . . I think Phylis is moulded very carefully into her community. She’s working, basically, I think in an all-girl environment on a switchboard. She is a respected member of Telecom, working quietly. Got a flat in the northern suburbs. Even in the bars . . . she’s not loud about it; she’s just one of the girls playing pool.

(cited in Hodge, 1993b, p. 115)

The 1970s and 1980s were not without difficulty. Spellman employed another transwoman (whom he refers to as a ‘drag queen’), and comments:

We were fairly shocking. We actually had a topless barmaid that was a drag queen, and the police actually came in to tell me to cover up the girl – and I said, ‘Why can’t a boy walk around without his shirt on?’ – which confused the police no end. They didn’t have one for that! We slapped people in the face with sexuality there a bit.

(cited in Hodge, 1993b, p. 108)

Spellman adds:

The business was mostly a casual bistro, bar attached, and the gayness was – I don’t know – it wasn’t like your Sydney gay pub where

everyone screaming this that and the other; it was just a bar. Much more discreet than it would be in Sydney. You have to be up here! The cowboys don't like it that much. They don't like poofsters screaming there.

(Personal Interview, 1991a)

Walking the fine line between living a life with integrity while maintaining effective social relations has always presented challenges for Territorians perceived as not conforming to prevailing gender norms. It is testament to the talents, perseverance and maturity of the immigrant Phylis Burns that she 'moulded' into her community so admirably. This contrasts with the experiences of the 'first Aboriginal man to come out [who] started wearing women's clothes' and who, explains Lee, in the late 1960s felt compelled to leave Darwin permanently due to transphobia (Personal Interview, 2017).

Throughout most of the twentieth century, Territory-born trans people have had to acquire the self-awareness and life skills to be able to successfully negotiate 'a comfortable and healthy life' in the absence of public role models or support services or legislative protections. Trans citizens frequently encountered stresses such that they had to leave their homes and families. Being relegated to the fringes of society meant many young trans people had few options for employment, financial security or access to needed medical services.

In the late 1970s another young Aboriginal man, Phyllis (no relation to Phylis Burns), began to transition. Gary Lee vividly describes the racism present in the mainstream gay culture as experienced by Aboriginal gay men (Hodge, 1993b; Lee, 1996, pp. 9–11). He also notes that in those times Aboriginal gay men themselves often displayed transphobia towards trans people (Personal Interview, 2017). Lee saw how Phyllis was treated by many of her gay peers and offered to pay her airfare to join him in Sydney, where he was living in the early 1980s (Personal Interview, 2017). The family circumstances surrounding Phyllis' departure and later return to Darwin are described by one of her friends in an interview for *Did You Meet Any Malagas?*:

She wanted to wear a dress all the time, and she had the body to do it. It got to the point where her parents just couldn't accept it, and they drove her out of the house, and then drove her out of the suburb, and then out of Darwin to Sydney. When she got to Sydney, she became a hooker and ended up in a court room. She ended up going through this court case over three years . . . working as a female, being charged as a female, but then being placed into a man's prison. . . .

Soon after that I came back to Darwin and had to talk to her parents about what she was doing down there. . . . And I'm sitting there talking

to her mother – who by the way is my aunty – ‘Phillip would like to come, I mean, Phyllis, I mean Phillip. Sorry, I’ve known Phyllis as Phyllis all of my life, for as long as I’ve known her. I’m not about to start calling her Phillip. So when I say Phyllis, I mean Phillip’ . . .

She said: ‘Yeah, tell Phyllis, Phillip, he can come home’. And I looked at her and said: ‘Yeah, okay, I’ll tell her’ and then I left. Phyllis and I made contact and I said: ‘Well, girl, you can come home now. Your family is missing you. They’re not going to attack you or drive you out of Darwin anymore. They’ve accepted’.

(Personal Interview, 1991b)

It was around this time that Territory-born and raised Sianne Tate was developing an awareness of being trans. The youngest of four boys, she recounts that ‘it was hard’ growing up in a family interested in Motorcross and BMX racing for a child who played with dolls and liked Boy George and Madonna. Tate was wanting to transition but encountered an absence of appropriate medical services in Darwin. In the mid-1980s, aged fifteen years, she ‘ran away’ from Darwin to Perth where she was able to access hormones (Palin, 2015).

The 1980s was the decade during which the HIV/AIDS pandemic unfolded. The arrival of HIV saw gay and trans Territorians immersed in a widespread moral panic rooted in ignorance and saturated with fear, loathing, bigotry and blame. HIV generated an urgent impetus for greater engagement with trans people for public health reasons, thereby leading to greater recognition of transgender and sex/gender diverse people. The AIDS crisis unexpectedly created an environment in which trans Territorians could acquire greater agency in their lives.

The community-based NT AIDS Council (NTAC, now NT AIDS and Hepatitis Council) was established in 1986, at around the time that Sianne Tate fled Darwin. The emotional reactions among the wider population were such that the NT Government was readily able to underfund the Council without consequence. It was not until 1990 that NTAC finally was able to secure its full funding allocation and begin delivery of appropriate services for affected community groups (Hodge, 2016; Smith, 1990). Over the following two decades NTAC and the AIDS Council of Central Australia (ACOCA) were vital platforms from which the Territory’s queer and trans citizens could explicate their needs and lobby for appropriate responses.

The NT Government throughout the 1980s consistently resisted all calls from various groups for anti-discrimination legislation. The Government rejected NTAC’s initial approach in 1989, explaining that ‘the community has not indicated that such an initiative is considered a priority at this time’ (Personal Correspondence, 1989). NTAC responded strategically by

holding a Territory-wide ‘phone in’ survey during Human Rights Week in December 1989. This documented Territorians’ experiences of discrimination and complaint resolution. Many issues were reported, yet in not one instance was anyone able to advise that their problem had been redressed. The results were useful in the writing of a comprehensive law reform and policy development submission that NTAC tabled with the NT and Commonwealth Governments in February 1990. Major recommendations included the introduction of anti-discrimination legislation outlawing discrimination on the grounds of HIV status and of sexual preference – which was defined as including ‘transsexuality’ (Patterson, Hodge, & Smith, 1990). The conflation of gender identity and sexuality was clumsy, notwithstanding that this was a new field of law lacking in sophistication (Hodge, Patterson, & Smith, 1990).

NTAC continued to pursue anti-discrimination legislation. Over the next three years it participated in a working party to assist the NT Government with community consultations, and subsequently publicly lobbied the recalcitrant Government over unduly homophobic elements of its draft legislation (Hodge, 1991, 1993a). The *Anti-Discrimination Act* came into effect in 1993.¹ Without NTAC’s proposal and additional input – an instance of successful community advocacy instigated by the three volunteers in NTAC’s law reform working group – gender identity would not have been included at all in the new law. It was a significant milestone for trans Territorians, and the first of further legislative acknowledgements that would be pursued in the new century (DCLS, 2015).

In Alice Springs, ACOCA worked closely with John Cross (Narrunga/Kaurna/Ngarrindjeri), the gay men’s peer educator with Central Australian Aboriginal Congress, to nurture the inputs of Indigenous people in responding to the health crisis (Personal Interview, 1993; Walcott, 2016). The first national Aboriginal and Torres Strait Islander Gay Men and Transgender Sexual Health Conference, *Anwernekenhe* (‘us mob’ in Arrernte), was held in Central Australia in late 1994. It was the culmination of ‘a long-held ambition of a group of particularly dedicated young Aboriginal men’ – notably John Cross. Although originally conceived of as a conference for gay men, *Anwernekenhe* intentionally sought to involve trans people.

The 73 delegates from across the nation included 66 Indigenous men and sisters/girls. They formulated 45 recommendations for the development and implementation of health care in all Australian jurisdictions. While all of the recommendations broadly pertain to trans people, several specifically call for the inclusion of trans people in decision making, policy preparation and service delivery (AFAO, 1994). This conference was a significant milestone too, not only for trans Territorians but also for Indigenous trans people nationally.

Gary Lee was one of the people involved in *Anwernekenhe*'s original national working party, and he subsequently continued as the NT representative. Lee was working with Danila Dilba Aboriginal Medical Service in Darwin and, following the conference, it was agreed that he should be placed with NTAC as an outreach worker. He was the first Indigenous person to work with the AIDS Council.

Lee's brief was to consider the health of Indigenous people who identified as gay, bisexual, transgender, or intravenous drug users. His groundbreaking report *Malaga to Malaga: Man to Man – Aboriginal and Torres Strait Islander HIV/AIDS Research Report* was released in 1996. The report's introduction makes clear the nature and scope of the challenges (Lee chose to discuss all of the target groups with a generic term):

There has been no previous research conducted on this community. . . . Information on Aboriginal gay sexual health issues is not found, in general, in the available health literature for the Northern Territory (NT). . . . For the most part, Aboriginal gay men's sexual health issues are also absent from sexual health programs delivered in the wider NT. . . . An analysis of the material reveals that it is completely heterosexual in its content and form, and is often designed for a non-Aboriginal audience. Various 'safe sex' campaigns in the past, aimed at reaching the Aboriginal and Torres Strait Islander population in the NT, have failed to address the issues of sexual difference and identity in our communities.

(Lee, 1996, p. 1)

Lee's report defined the target populations around axes of identity, community attachment, and location (urban/rural/remote) with regard to the historical, social, and cultural aspects of health issues. His recommendations created a road map that sought to inform and lead to development of education programs. However, Lee achieved much more than producing this plan; he initiated implementation of NTAC's services for these target populations. During the ensuing years Lee authored or co-authored a number of papers and reports of national relevance that addressed issues of HIV and of sexual abuse in the lives of sisters.²

Shortly after Lee's first report, NTAC established a project designed to directly engage specifically with sisters. The video *Tayikwapi: Documentary on the Sista Girls* was released in 1998 (NTAC, 1998). It is the first audio-visual documentary to be recorded about the lives and culture of sisters in the NT.

From this time onwards, trans Territorians began to attain a higher profile and a more vocal presence. Through her involvement with the *Tayikwapi*

project, Crystal Johnson commenced volunteer work at NTAC and then joined the Top End transgender group ‘Sista Girls’ (Johnson, 2015, p. 28). In 2000 she penned commentary for the magazine *GayNT*, firstly as Cyril and then as Crystal (Crystal Johnson, 2000a). In her first column, she wrote:

On Bathurst Island, the Sista Girls get ridiculed lots. Mostly from the men. Even if you hang around the Sista Girls, you’ll get ridiculed. There’s not much support from our own people at home . . . there’s plenty of us though. At last count, I think there was about fifty-eight. Ranging from little ones about eleven years old to late forties. There’s some lesbians on the other side of the island too. We all look out for each other but we’ve still got lots of our family that do support us. We’ve been around as an unofficial group for about fifty years, but we’ve now become a group that travels and visits other communities to have meetings about HIV, drugs, alcohol, transgender issues, and lots more.

(Cyril Johnson, 2000a, p. 14)

Crystal’s experiences with NTAC opened a pathway for her to become a champion of justice and equality for trans Territorians. Her achievements were noted by her wider community in Bathurst Island, and in 2012 she became the first Indigenous trans politician to be elected to public office in Australia. Together with Brie Ngala Curtis, their non-Indigenous collaborator Starlady, and several others in Alice Springs, they established in 2014 the advocacy, education, and referral service Sisters & Brothers NT (Johnson, 2015, pp. 28–34). The following year they published the informative booklet *Voices from Our Community: Sexual, Bodily and Gender Diversity in the NT & Tri-State Region* (Sisters & Brothers NT, 2015).

Half a century ago the mainstream views about trans Territorians were entirely ignorant, and the treatment of them at best was dismissive. In the 1970s Phylis Victoria Burns utilised her skills as a performer and DJ to break down barriers. Sianne Tate, when she eventually returned to Darwin, still met with limited access to appropriate health services, resources, support, and, importantly, medications. She later quipped ‘during this time hair sprouted in places I didn’t know it could grow’. Since returning, Tate has been a leading figure in the entertainment industry and has mentored many young people, of whom a number have developed careers as performers both in the NT and elsewhere in Australia (Palin, 2015).

It is Indigenous Territorians, though, who most frequently have been at the forefront of efforts to achieve recognition and services for trans Territorians. Their successes often have had a powerful national impact. A national organisation grew out of the 1994 *Anwernekenhe* conference, and since then there have been five more conferences with the most recent taking place in Alice Springs in 2015. Crystal Johnson’s profile is such that she is regularly

called upon to represent trans people in various settings nationally. Across generations, Crystal Johnson acknowledges Gary Lee as her mentor, while Brie Ngala Curtis in turn acknowledges Crystal as her mentor.

Today our awareness of yimpininni, gwarregwarre, sistagirls, brothaboys, and trans Territorians has improved. Unfortunately trans citizens continue to confront difficulties in negotiating the vitally core facet of gender identity. Their health remains too easily compromised by rejection, vilification, discrimination, assault, social isolation, internalised hatred, and depression and the associated risks of self-harm and suicide. Our understanding of and our commitment to meeting people's needs, particularly in the crucial field of health, is improving but is still unacceptably curtailed.

Stephen Kerry's book and hir³ articles in the *International Journal of Transgenderism* are especially notable for reporting on the first comprehensive survey of transgender and sex/gender diverse people in the NT (Kerry, 2014, 2016b). This survey, lamentably, is long overdue – a fact which increases our appreciation for Kerry's initiative and achievement. As someone who identifies as genderqueer, xie brings authenticity and sensitivity to hir scholarship.

Kerry's research provides us with fresh insights into the varied and vibrant lives of the Territory's trans citizens. It informs us of their ongoing efforts and remarkable achievements, undertaken with self-respect and dignity. It outlines our continuing journey in preserving human rights and promoting social justice. The survey significantly updates and substantially expands Gary Lee's road map published two decades ago. Yet it is saddening to observe that too many of Kerry's salient recommendations are reminiscent of those presented in the 1994 Anwernekenhe report and the 1996 *Malaga to Malaga* report. We cannot be complacent about these recommendations if we truly desire further improvements in the lives of trans Territorians. This is Stephen Kerry's important message to all of us.

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Notes

- 1 *Anti-Discrimination Act 1992*, (Act No. 80, 1992); received assent on 18 December 1992, three years to the month following NTAC's Territory-wide discrimination phone survey.
- 2 Gary Lee's work and contributions were recognised by NTAHC with the award of Life Member in 2015, the first Indigenous person to receive this award. A comprehensive listing of Lee's publications is included in the bibliography of *Colouring the Rainbow* (Hodge, 2015).
- 3 Stephen Kerry uses gender-neutral pronouns.

Acknowledgements

First, I would like to acknowledge the traditional owners, past and present, of the land on which I wrote this book; the Larrakia people.

My heart-felt thanks and appreciation goes to the participants.

I am also very grateful to my editor, Alex McGregor, and the anonymous reviewers for their positive and constructive feedback on the manuscript.

I would also like to thank Alice Springs Pride, Jane Black, Gemma Blackwood, Karlee Burgess, Tony Briffa, Sally Cotton, Darwin Pride, Owen Davies, Eva de San Miguel, Christine Doran, Andy Ewing, Nico Forster-Jordan, the Gender Centre, Jennifer Gow, Sharyn Graham Davies, Tony Hand, Bethne Hart, Bronwyn Hazell, Dino Hodge, Pixie Jenkins, Amanda Janssen, Aaron Cooper Kusabs, Angelina Lau, Joanna Leigh, Lynette McKee, Kavita Nandan, the Northern Institute, NTAHC, Out NT, Rainbow Territory, Roz Rowen, Sisters & Brothers NT, Erica Southgate, Denise Taylor, Nik Taylor, Jim Wafer, Fanny Waterfalls, and Amanda Wetzel.

And special thank you to Rose, who always wakes me when it rains, and Charles, the newest member of my family.

Abbreviations

ABC	Australian Broadcasting Corporation
ATSI	Aboriginal and Torres Strait Islands
FtM	Female-to-male
GLBTQI	Gay, lesbian, bisexual, transgender, queer, intersex
HRT	Hormone replacement therapy
MtF	Male-to-female
NT	Northern Territory
NTAHC	NT AIDS and Hepatitis C Council
SRS	Sex reassignment surgery



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1 Introduction

For several decades, Australia's transgender communities have given voice to their inherent diversity. An example of this is the addition of the phrase 'sex/gender diverse'. Increasingly, the diversity extends beyond how one identifies as trans or 'other' terms to other socio-cultural identities, such as socio-economic status, race and ethnicity, religion, dis/ability, and where one lives. At the centre of this book are individuals from Australia's Northern Territory (NT), and it is argued that what they say about living in a remote part of the country also has significance for all transgender and sex/gender diverse people who live outside cities, either in Australia or internationally. In Halberstam's (2005) pivotal work on transgender geographies, *In a Queer Time and Place*, she observes: 'In gay/lesbian and queer studies, there has been little attention paid to date to the specificities of rural queer lives' (p. 34). This has certainly been the case within the Australian transgender literature. The earliest research into the lives of transgender Australians, in the 1980s and 1990s, was biased toward city-dwellers or, more specifically, inner-city ghettos. British sociologist King (1993) describes them as 'outsiders' who congregate in 'areas associated with deviant sexuality which are to be found in most large cities' (p. 134). Evidence of this can be found in two of the first publications: Perkins' *The 'Drag Queen' Scene* (1982) and Perkins, Griffin, and Jakobsen's, *Transgender Lifestyles and HIV/AIDS Risk* (1994). While recent research projects have become more national in their approach, my review of the extant literature (Kerry, 2014) discovered that if research projects recruited people from the NT rarely did they elaborate on region-specific issues. In addressing this dearth, this book argues that trans people living in remote areas of Australia, such as the NT, feel a need to move to large cities. Two of the most pressing issues for those who live in the NT are lack of social support and medical care. Julia (transgender woman, 29) says: 'I feel like there's not enough resources here. And I'd be better off going to [southern capital city] for that'. Thus, these have become push factors forcing trans people to choose between living in their affirmed gender or living in a place they call home. This dilemma is all

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the more dire for Indigenous peoples, for whom family, community, and place are essential aspects of identity, spirituality, and health and wellbeing. Crystal (sistergirl, 45) says: ‘Everybody has a title, everybody has a name, everybody has a country and a song and a place of birth. That’s what make Aboriginal people tick’. Those who leave have become displaced people and those who stay are struggling within ruptured communities. Even in the NT’s capital city, Darwin, there simply is not enough people to sustain an ‘out’ trans community. Sarah (transgender woman, 43) ran away at 15 and returned in her 30s. She says Darwin is ‘not an easy place to be transgender in, coz it’s so small’. This book gives voice to transgender and sex/gender diverse people living in Australia’s NT as well as Australia’s transgender First Peoples, also known as sistergirls and brotherboys. As will be explored, while these two populations experience many of the same issues of those living in cities, they are aggravated by the difficulties of living in remote areas, such as the NT.

The Northern Territory

The NT is colloquially known as the Territory and it is one of two mainland territories and six states in Australia. It is twice the size of France and the Territory’s climatic characteristics range from the cyclone-prone tropical north to the desert of the south. Over 245,000 people live in the NT, over half whom live within 60 km of the capital city, Darwin, located on the north coast. There were three attempts made by the British to colonise the NT and a ‘frontier’ mentality persists even today. In Hodge’s (1993b) ethnography of gay and homosexual men in Darwin, he observed that the city ‘boasts a tradition of being a frontier town’ and he goes on to say it is ‘rough and male dominated’ (p. i). Sarah agrees, saying: ‘There is an ocker¹ feel, and there is a workman culture’. Flood and Hamilton (2005) have suggested that the NT is one of the two most homophobic states/territories in Australia. This view is supported by Nell (transwoman/intersex, 52) who has ‘never lived in such a suppressed state in my whole life as I have in the NT’. More men than women live in the NT and the population is highly transitory. The high turn-over of residents has a negative impact on those who stay in the NT. Oliver (crossdressing man, 60) says:

I must admit it does piss me off when you get a friend and the friend moves away. [. . .] That does piss me off about Darwin, but you know it’s part of it.

The many short-term workers, especially within the mining industry which dominates the north, are colloquially referred to as ‘fly-in-fly-out’ workers.

Also, during ‘the dry’ season, that is, between April and September, domestic and international tourists come to the NT to enjoy the lower humidity and milder temperatures. Another central feature of the NT is that traditional Indigenous cultures remain prominent and 28 per cent of the population are Aboriginal and Torres Strait Island (ATSI) people, which is higher than the national average of 2.5 per cent and the other states and territories. Many ATSI people still live in remote traditional communities and there are many areas where contact with Europeans happened relatively recently. For example, according to Brianna (sistergirl, 32), her grandmother’s people, the Luritja, were ‘the last tribe to be discovered in Australia’ and her grandmother ‘didn’t come into contact with a white person until she was a teenager’ (Curtis, 2015, p. 37).

This short introduction to life in the NT sets the scene for the story that will unfold in the following pages. In various ways, as the book will reveal, the specifics of the NT’s geography, climate, and demography all contribute significantly to the lived experiences of transgender and sex/gender diverse Territorians. As Dino Hodges outlines in his Foreword to this book, the queer community in the NT is strong and has a vibrant history. For example, the Darwin Pride Festival began in 1985 and Alice Springs hosted its first Pride Carnivale in 2013. Presently in the NT, there are three organisations which support the queer community. The most visible is the government-funded NT AIDS and Hepatitis C Council (NTAHC) which was originally incorporated as the NT AIDS Council in 1986. In recent years, two volunteer-run support and advocacy groups have formed: Sisters & Brothers NT and Rainbow Territory. The former is an Alice Springs-based advocacy and reconciliation group for sistergirls, brotherboys, Indigenous and non-Indigenous LGBTIQ people. Rainbow Territory is a Darwin-based organisation which was founded in 2014. It advocates for the human rights of Northern Territorians who identify as LGBTIQ. Although Darwin has a ‘gay nightclub’ it is primarily aimed at tourists, thus the predominant social feature for queer people in the NT is informal social networks. Felix (transman, 29) says that he relies on ‘small private groups of trans friends that catch up to offer support’. Similarly, Ivan (transman, 47) refers to ‘my informal group of FtM mates’. The problems associated with establishing social networks in the NT is just one theme which will appear in this book.

Transgender movement and transgender theory

In the 1980s, transgender individuals around the world began to coalesce into a social identity movement. One of the most pressing issues they raised was invisibility and transphobia they experienced within Gay Liberation and the Women’s Liberation of the 1960s and 1970s. While it is not my

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intention to review the extant literature (see Stryker, 2006), I will draw attention to several key features which will assist in framing the lived experiences of transgender and sex/gender diverse people living in the NT, as well as transgender Indigenous Australians. First, it is important to underline how by coming together transgender individuals were openly identifying as ‘transgender’. By acknowledging their gender history, they refused to ‘pass’. In *The Empire Strikes Back: A Posttranssexual Manifesto*, Stone (2006) writes: ‘To deconstruct the necessity for passing implies that transsexuals must take responsibility for *all* their history’ (p. 232). Feinberg (1996) agrees, stating passing ‘is a product of oppression’ (p. 89). Stone (2006) goes on to urge others to:

Forgo passing, to be consciously ‘read’, to read oneself aloud – and by this troubling and productive reading, to begin to *write oneself* into the discourses by which one has been written – in effect, then, to become a [. . .] posttranssexual.

(p. 232)

At its core, they were saying that transgender individuals were living very diverse lives; neither conforming to the gendered expectations of men and women, nor the medical profession’s expectations of patients with ‘gender dysphoria’. Thus, a second pressing issue for transgender individuals in the 1980s was the power the medical profession possessed over determining who was and who was not eligible for sex reassignment surgery. In *Sex Changes: Transgender Politics*, Califa (2003) writes:

Gender clinics have been operating long enough now in [the USA] to create significant number of people who are angry about the way these programs are run. Rather than being grateful for any help they are given, transsexuals today are questioning the authority of the medical and mental-health professionals who function as gatekeepers for sex reassignment.

(p. 224)

The collective views expressed by transgender activists, authors, writers, and academics became known as ‘transgender theory’. This nascent literature extended the writing of its antecedents – gender theory, feminist theory, and queer theory – and gave transgender individuals a voice with which to speak to, and challenge, broader sex/gender ideologies.

In *Recent Transgender Theory*, Hausman (2001) offers an overview of early works published in the 1980s and 1990s. She observed that rather than simply transplanting gender theory, feminist theory, and queer theory onto

the transgender subject, transgender theory has crafted a unique discursive field which goes beyond what it means to be transgender; it proffers a reconceptualisation of sex/gender ideologies, whereby normative notions of being a man, being a woman, and being transgender are disrupted. Prosser (1997), too, observes that ‘transgender specifies a methodology, a subjectivity, and a community which, while it might overlap, is distinguishable from queer’ (p. 313). In the pivotal collection, *The Transgender Reader*, editor Susan Stryker (2006) has said: ‘New modes of gendered subjectivity have emerged, and new discourses and lines of critical inquiry have been launched’ (p. 2). Transgender theory includes many discourses and the genre is porous and amorphous, not unlike queer theory before it; its indefinability is one of its defining attributes, so too its resistance to concretisation and solidity. Transgender theory is the articulation of diversity; especially those transgender voices which are often themselves overlooked within the transgender movement. As will become clear throughout this book, two such populations are those who live in remote areas and transgender people of colour. Therefore, this brief review of the transgender movement and transgender theory offers a scaffold onto which to sculpt a discussion of transgender people who live in the NT and transgender Indigenous Australians, also known as sistergirls and brotherboys.

Methodology

Since the 1970s, academic and government-funded research into transgender Australians has mapped out a range of identities, lived experiences, behaviours, and desires. Thus, the extant literature provides a glimpse into the diversity within Australian transgender communities. Moreover, from this research it is possible to determine that transgender and sex/gender diverse Australians continue to face considerable barriers to health and wellbeing: namely, economic instability, social exclusion, mental illness, and abuse (see Kerry, 2014). Having said that, the picture remains incomplete. The motivation for this book emerged out of the fact that the extant Australian transgender literature rarely includes individuals from two populations: transgender people from the NT and transgender ATSI people, also known as sistergirls and brotherboys. Since the 1990s, there have been nine research projects which have investigated the lives of transgender and sex/gender diverse Australians: *Transgender Lifestyles and HIV/AIDS Risk* (Perkins et al., 1994), *Health Needs Assessment of Transgender People* (Bliss & Porter, 1996), *Australian Transgender Survey (2001)* (Kerry, 2016a), *Private Lives 1* (Pitts et al., 2006), *TranzNation* (Couch et al., 2007; Pitts et al., 2009); *Private Lives 2* (Leonard et al., 2012), the *First Australian National Trans Mental Health Study* (Hyde et al., 2014), *From Blues to Rainbows*

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(Smith et al., 2014), and *Female-to-Male (FtM) Transgender People's Experiences in Australia* (Jones et al., 2015). However, only a few indicate whether their sample included people from the NT. In *TranZnation's* (Couch et al., 2007) sample of 229 only four (1.7 per cent) are from the NT. Of the 946 participants in the *Mental Health Study* (Hyde et al., 2014) only 11 (1.2 per cent) are Territorians. In *Female-to-Male (FtM)* (Jones et al., 2015) 'less than 1%' of 273 came from the NT and the Australian Capital Territory (combined) (p. 28). Furthermore, in regards to transgender Indigenous people, there were four (1.6 per cent) in *TranZnation* (Couch et al., 2007), 22 (2.3 per cent) in the *Mental Health Study* (Hyde et al., 2014), and less than 5 per cent in *Female-to-Male (FtM)* (Jones et al., 2015). As a result of these relatively small numbers, it is not possible to determine either their respective demographic profiles nor any issues pertinent to these populations. Only the *Mental Health Study* (Hyde et al., 2014) singles out those issues facing sistergirls and brotherboys, many of which will be raised in this book. Having said this, the purpose of the book is not to solely address the dearth of material in the literature, but it is argued that the lived experiences of those living in the NT as well as sistergirls and brotherboys offer insight into the broader issues facing trans people who live in remote areas away from cities, not only in Australia but internationally.

Online survey

To this aim, a research project titled *Transgenderism in the Northern Territory* was started in early 2014. Ethics approval was obtained from the Charles Darwin University's Ethics Committee, first for an online survey (Approval Number H14020) and then for in-depth interviews (Approval Number H15002). During the ethics application stages I contacted several individuals and organisations who were heavily involved in and had knowledge of transgender and sex/gender diverse people in the NT. I asked them questions about their views and the views of their organisations regarding the lived experiences of transgender and sex/gender people living in the NT. The purpose of these informal conversations was to gauge whether there was a need for research and for input into the research questions. As a result of these conversations, it was determined that the primary issues within the community were social isolation and access to health care. Because this was the first time trans people in the NT had been surveyed, it was deemed necessary to gather as much information as possible. The online survey therefore consisted of 70 questions which were designed to measure the importance of these issues as well as explore what other issues may be significant for transgender and sex/gender diverse Territorians and sistergirls and brotherboys. The questions were collated into five

sections: demographics, social relationships, health, transgenderism, and life in the NT.

I took my direction from key stakeholders in the community because those with local knowledge have greater insight into the needs of the community. Underlining these considerations is the fact that I am an outsider. As explored above, the NT has a relatively small population and it is highly transitory. That is, many people who move to the NT do so for only a short period. Thus, the local population is reluctant to invest socially and emotionally in new arrivals from ‘down south’. I moved to the NT in 2012 and the potential reluctance of people to trust me was taken into consideration. The first stage of the research project, an online survey, was deliberately designed as a pilot study to assist in gauging the needs of the community and to determine whether I, as an outsider, and my research would be accepted. An online survey was also chosen because, as Kuper, Nussbaum, and Mustanski (2012) suggest, ‘the Internet now provides the ability to recruit a geographically diverse, non-clinical sample, where such individuals may not otherwise come into contact with researchers’ (p. 246). The NT has very distinctive geographic and demographic features and an online survey appeared to meet some of the challenges of conducting research here. Despite difficulties with Internet access in remote areas of the NT, the number of NT households that have access to the Internet is equal to or, in some cases, greater than other Australian states (ABS, 2014). Further, in the *Measuring Australia’s Digital Divide* report, Thomas et al. (2016) concluded that the NT ‘currently ranks fourth out of the eight states and territories for digital inclusion’ (p. 21). The authors go on to suggest Indigenous Australians in remote areas of the NT ‘are quickly adopting new digital technologies’ and engaging in behaviours not necessarily found in other populations, notably ‘practices such as the sharing of devices’ (p. 22). Similarly, Carlson and colleagues (Carlson et al., 2015; Carlson & Frazer, 2015) argue that social media, and Facebook in particular, are being used by Aboriginal people in help-seeking and help-giving, especially around issues of death, mourning, and suicide. As will be explored later in this book, Starlady (transfabulous, 38), an ally of Indigenous Australians and a participant in this research, found that resources being distributed by the advocacy group Sisters & Brothers NT on USB devices were being passed around not only within communities but also across communities, such that when she and other members of Sisters & Brothers NT arrived in a new community its members had already seen those resources.

The advertising and recruitment stages consisted of inviting Sisters & Brothers NT to share the survey’s URL on their website and Facebook page, as well as employing snowball techniques whereby members of the organisation would share the URL with others in their social networks. The other

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two organisations in the NT (e.g. Rainbow Territory and NTAHC) and 22 organisations nationally (e.g. the Gender Centre) were also contacted and invited to share the online survey's URL. I received very positive feedback from many of these organisations willing to share this call for participants among their networks. The Gender Centre also included my call-out for research participants in their newsletter *Polare*. The online survey remained open for 18 months and 13 people participated. Participation was anonymous and gender-appropriate pseudonyms (Table 1.1) were assigned based on answers to the gender and transgender identity questions. To determine whether the survey successfully recruited 'a geographically diverse' sample participants were asked for their postcode. While these postcodes have been omitted from the results in order to maintain anonymity, I can conclude that

Table 1.1 Demographic information of 26 participants

<i>Name</i>	<i>Gender</i>	<i>Sexuality</i>	<i>Ethnicity</i>	<i>Age</i>
Amelia	Transwoman	Bisexual	Asian/White	20
Andria	Transwoman	Queer	White	38
Belinda	Transsexual	Bisexual	White	37
Brendan	Transgender man	Bisexual	White	39
Brianna	Sistergirl	Straight	ATSI	32
Bron	Genderqueer	Queer	White	30
Catherine	Sistergirl	Straight	ATSI	30
Crystal	Sistergirl	Straight	ATSI	45
Dorian	Transman	Gay	White	57
Erik	Brotherboy	Bisexual	ATSI	38
Felix	Transman	Straight	White	29
Gabriel	Genderqueer	Queer	White	31
Hamilton	FtM	Queer	Not answered	37
Ivan	Transman	Lesbian	White	47
Julia	Transgender woman	Straight	Asian/White	29
Justin	Transman	Bisexual	White	33
Kelvin	Transman	Straight	Asian	28
Leah	Transwoman	Straight	White	52
Leonard	Crossdressing man	Bisexual	White	59
Mary	Transwoman	Lesbian	Asian/White	20
Nell	Transwoman/intersex	Not answered	Not answered	52
Nicole	Transwoman	Bisexual	White	22
Oliver	Crossdressing man	Bisexual	White	60
Patricia	Transwoman	Not answered	Not answered	65
Sarah	Transgender woman	Straight	White	43
Starlady	Transfabulous	Not answered	Not answered	38

two participants lived outside of the NT, four were living in various remote locations across the Territory, and seven were located in the Darwin area. A thematic analysis was undertaken of their responses and it was concluded that social isolation and access to health care were central themes. During the advertising and recruitment stages of the online survey I received considerable positive feedback from individuals and organisations regarding the need for more research. In a paper I published based on the online survey results (Kerry, 2016b), I concluded: ‘The success of this project and the rich stories told by these individuals has led the author to conclude that further research is warranted’ (p. 10).

In-depth interviews

I set out to conduct in-depth interviews with trans Territorians. It seemed a natural progression for two reasons. First, I am a sociologist and, according to Benney and Hughes (1977), sociology is the science of the interview. Second, in-depth interviews would allow me to further hear the voices of trans people in the NT as well as sistergirls and brotherboys. I pause here to focus on this issue of ‘voice’. My research is heavily influenced by several key theoretical frameworks. In addition to transgender theory, mentioned earlier, I am also guided by postmodernism, feminism, and queer theory. An underlining theme of all three is a discursive field of challenging dominant ideas, knowledge schemas, and voices which are predominately produced by European, straight, and able-bodied cismen. Wilchins (2004) argues:

Postmodernism has generated a powerful set of tools for dismantling arguments, revealing their hidden assumptions, and diminishing their power so that difference can emerge. That’s great for the struggle for gender rights, because that’s exactly what we want to do.

(p. 97)

Postmodernism isn’t so much interested in traditional utopian ideals of freedom and human emancipation, but rather, according to Seidman (1997), postmodernism prefers:

Deconstructing false closure, prying open present and future social possibilities, detecting fluidity and porousness in forms of life where hegemonic discourses posit closure and a frozen, natural social order. The hope of a great transformation is replaced by the more modest aspiration of a relentless defense of choice, democratization, and struggles for social justice.

(pp. 43–44)

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This rethinking of the ‘social order’ is also prevalent within social research, and feminist contributions to research methodologies offer a how-to manual for those engaging in research into marginalised populations. This is especially true for researchers, such as myself, who employ the interview as a research tool.

Feminists have viewed the interview ‘conversation’ and the interviewer’s role and responsibility with some scrutiny. Reinharz (1992) cites sociologist Ann Oakley’s own self-reflection and change of focus as a feminist engaged in ‘scientific’ enquiry. Oakley argued for a new model of interviewing that placed emphasis on intimacy, self-disclosure and ‘believing in the interviewee’ (cited in Reinharz, 1992, p. 26). As Reinharz (1992) argues:

Guiding this new model was a proposed feminist ethic of commitment and egalitarianism in contrast with the scientific ethic of detachment and role differentiation between researcher and subject.

(p. 27)

Traditionally, interviews are bound by hierarchical researcher-researched structures with the researched occupying the subordinate position (Fontana & Frey, 2000, p. 645). Feminist thought has made a significant contribution to our understanding of this structure. Olesen (1998) insists that the researched are active in the research, such that they have become ‘researchers’ themselves: ‘For they, along with the researchers, construct the meanings that become “data” for later interpretations by the researcher’ (p. 317). In Spivak’s postcolonial feminism, ‘the subaltern speaks’ (Spivak, 1988) whereby it is necessary for women of colour, as colonised people, to be also given a voice. This perspective is essential because this research includes Australia’s transgender First Peoples. Moreton-Robinson (2000) argues that when Indigenous people tell their story to white people it undergoes ‘white editing or scribing’ (p. 2). As a second-generation Australian of English heritage, I find this very hard to argue against. Nonetheless, Moreton-Robinson (2000) also suggests that these ‘life writings’ do not ‘erase the subtext, which is informed by the knowledge and experience of Indigenous women’ (p. 2). These considerations of gender, race, and the power of the researcher enable a rethinking of the interview process such that, while not all imbalances of power can be addressed or overwritten, at the very least, by acknowledging their existence it is hoped this goes a long way to respect the individual, their story, and ways in which they are documented. One of my participants, Crystal, a sistergirl from the Tiwi Islands said in her interview: ‘These things have to be told and document. I document my life’.

The third theoretical framework I use to scaffold my discussion of the lives of transgender and sex/gender diverse peoples in the NT is queer

theory. As a distinct discursive field, it emerged out of the nascent gay and lesbian studies of the 1980s and 1990s, yet, rather than being limited to discourses of sexuality, queer theory also drew attention to sex/gender. Within its deconstructionist heritage, which it inherited from postmodernism and feminism, queer also becomes a verb, a ‘queering’ (Hall, 2003, p. 14; Kirsch, 2000, p. 33). Queer theory then is a way of looking, acting upon or uprooting previously held beliefs, opinions or even axioms, that were unproblematised or unproblematisable concerning sex/gender. Jagose (1996) writes that queer ‘calls into question even such apparently unproblematic terms such as “man” and “woman”’ (p. 3). While feminism and gender theory called into question gender socialisation and what it means to be a man or a woman, queer theory extended its lens to systems of power which maintained not gender roles per se, but the ideologies of sex/gender as binary. By extending beyond the sex/gender binary, queer theory did not suggest that there was a ‘third sex’, but rather, it engages a space *outside* of sex/gender and thus what Whittle (2005) refers to as a ‘gender fuck’ (p. 117).

While postmodernism, feminism, and queer theory have garnered traction in changing the lives of people who live on the social margins, there has been a considerable backlash – an example of which is the attack on what is often pejoratively referred to as ‘political correctness’ over the past few decades. In the 1990s, transactivist Leslie Feinberg (1996) retorted: ‘Where I come from, being “politically correct” means using language that respects other peoples’ oppressions and wounds. This chosen language needs to be defended’ (p. ix). These viewpoints and ideological musings provided me with a ground on which to set up my research methodologies. In contrast to the online survey questions, the in-depth interview schedule was less reliant on predetermined questions and more focused on an open conversation style, guided by the interviewee. Having said that, a set of themes were prepared based on the online surveys. Thus, I asked participants about families, relationships, health, and being transgender. Moreover, it is not my intention to compress what people have said to me into an academic discourse; rather I want the reader to hear individual voices.

The advertising and recruitment stage for the in-depth interviews mirrored that which was employed for the online survey noted above. That is, organisations in the NT (e.g. Sisters & Brothers NT) and nationally (e.g. the Gender Centre) were contacted and invited to share the advertising material. Additionally, I set up a Facebook page designed specifically for the interview phase of the project and sent out a media release, via the Charles Darwin University media centre, to local media outlets. This resulted in several interviews with local, national, and international print, radio, and television news media (Crothers, 2015a; Crothers, 2015b; Palin, 2015; Tsvirko, 2015). In several cases, members of the transgender community were also

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interviewed and this could be seen as endorsement for my research. Participants were given the option of being anonymous or having their real names associated with the research; they were asked to indicate which they preferred when they signed the consent form. Those who said they wished to remain anonymous were assigned a gender-appropriate pseudonym based on responses to the gender and transgender identity questions. Participants who agreed to the use of their real names are referred to by their first names only (Table 1.1). Throughout the book all participants are referred to by name and when they are mentioned for the first time in a chapter their primary transgender identity and age are included in parentheses. Several participants indicated to me that they had also participated in the online survey. Therefore, some people belong to both cohorts. However, because the online survey was designed to be anonymous, no attempt has been made to link participants' responses and for the remainder of this book participants in the online survey and the in-depth interviews will be regarded as different individuals.

Between mid-2015 and early 2017, 13 people were interviewed. An additional three people also contacted me about being interviewed; however, they did not follow through with this initial interest. Those participants who were living in the Darwin area were given the option of being interviewed in person or over the phone, whereas those living elsewhere in the NT were limited to the option of being interviewed over the phone. In August 2016, I was invited to participate in a public forum at the Alice Springs Pride Carnivale. During the week that I was in Alice Springs I conducted two interviews in person. In total, seven of the interviews were done in person and six conducted over the phone. The interviews ranged from 32 minutes to two hours and 13 minutes and the average duration was one hour and nine minutes. In 2015, I was provided some funds to employ a research assistant who transcribed three of the interviews; otherwise all interviews were transcribed by me. Copies of the transcriptions were emailed to participants and they were invited to make any corrections, additions, or request details to be omitted. None did so. Interviewees were also sent regular emails to update them on the progress of the research and invitations to public speaking events. Some would also email me to let me know how they were doing and provide updates on their family life and/or transition. Several also spoke of the desire to meet other transgender people and gave me permission to share their personal contact information with other participants. The interview transcripts were coded for responses to the prompt questions and key issues raised by the participants. Themes which emerged were experiences during childhood and with family (especially in regards to acceptance), chosen families as adults, social isolation (especially when it comes to knowing other transgender people), relationships and dating, what it means to be transgender and the process of coming out as transgender,

health issues (such as accessing health care), and living in the NT. These issues were raised by Indigenous and non-Indigenous participants. However, Indigenous participants also spoke of the tensions between being transgender and being Aboriginal, specifically the difficulties of acceptance within traditional ATSI communities which are highly gender segregated.

First-person narratives

One of the limitations of this research is the small number of Aboriginal participants. Of the 26 people who participated in the online survey and in-depth interviews, four self-identified as Indigenous: Brianna (sistergirl, 32), Catherine (sistergirl, 30), Crystal (sistergirl, 45), and Erik (brotherboy, 38). Although Australia's transgender First Peoples are often omitted from the Australian transgender literature, this doesn't mean that they haven't been telling their stories. Over the past two decades, sistergirls and brotherboys have been interviewed by reporters, documentary makers, television hosts, radio presenters, and editors of anthologies, and they have been making their own media, for example uploading videos to YouTube (Table 1.2).

Table 1.2 Sistergirls and brotherboys included in discourse analysis

<i>Name</i>	<i>Community</i>	<i>Source/s</i>
Dean	(Wiradjuri, New South Wales)	(Downes, 2016; Gloria, 2014; Murphy-Oates, 2015)
Francene	(regional Queensland)	(ACON, 2010)
Jeremy	(Fremantle, Western Australia)	(Downes, 2016; Whyte, 2016)
Jo	(Tiwi Islands, Northern Territory)	(Clarke, 2013)
Kai	(Waka Waka/Wuli Wili, Queensland)	(Clancy, 2015; Gloria, 2014; Murphy-Oates, 2015)
Nyarli	(Tiwi Islands, Northern Territory)	(Clarke, 2015)
Kooncha	(Wallaga Lake, New South Wales)	(ACON, 2010; Brown, 2004)
Laura	(Tiwi Islands, Northern Territory)	(Clarke, 2015; McCrum & Canny, 2009)
Lillian	(north Queensland)	(ACON, 2010; Burin, 2016)
Lisa	(Hunter Valley, New South Wales)	(Burin, 2016)
Maddy	(Melbourne, Victoria)	(Burin, 2016)
Max	(Wagga Wagga, New South Wales)	(Burin, 2016)
Rosalina	(Alice Springs, Northern Territory)	(Clarke, 2013; O'Saurus, 2014; Riley, 2013)
Simone	(Ceduna, South Australia)	(Clarke, 2013)
Taz	(Townsville, Queensland)	(Murphy-Oates, 2015)
Vanessa	(south-east Western Australia)	(Burin, 2016)
Vivian	(Tiwi Islands, Northern Territory)	(Clarke, 2015)
Zac	(Atherton Tablelands, Queensland)	(Burin, 2016)

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This plethora of first-person narratives has also been omitted from the Australian transgender literature. Thus, in addition to the online survey and in-depth interviews, I also conducted an analysis of contributions to an anthology (Clancy, 2015; Curtis, 2015; Johnson, 2015), news articles (Burin, 2016; Clarke, 2015; Riley, 2013; Sleath, 2014), documentaries (ACON, 2010; McCrum & Canny, 2009), television programmes (Brockie, 2013; Clarke, 2013; Murphy-Oates, 2015; O’Saurus, 2014; Whyte, 2016), and YouTube videos (Downes, 2016; Gloria, 2014). I conducted this first-person narrative analysis, not only to complement the views of the four people who participated in this research, but also to capture the views of sistergirls and brotherboys across Australia. Of the 18 people, 11 sistergirls and seven brotherboys, who were included in various media, five are from the NT and the remaining 13 are from New South Wales, Queensland, South Australia, Victoria, and Western Australia. The issues facing Indigenous Australians and the tensions between being transgender and being Aboriginal will be the focus of Chapters 4 and 5.

The sample

Throughout the three years I conducted this research, I was most often asked by reporters, colleagues, and community members: How many transgender people live in the NT? It is not possible to determine this figure, just as it is not possible to know how many Australians are transgender. The *Mental Health Study* (Hyde et al., 2014) states: ‘The exact size of the trans population is unknown’ (p. 6). However, in a study conducted in the USA (Flores et al., 2016), it was estimated that ‘0.6% of U.S. adults identify as transgender’ (p. 2). If this figure is applied to the last available population statistics from 2011, when the NT’s adult population numbered 178,900 persons, it may be estimated that 107 people in the NT are transgender. Therefore, it is arguable that a sample size of 26 people represents 25 per cent of trans Territorians. Having said that, there is no claim that the sample is ‘statistically significant’ because no quantitative data was produced. Rather, the project employed qualitative methodologies and was located within a feminist framework: emphasising voice and narrative. By examining the views expressed by participants it is possible to determine that participants came from various socio-economic, geographic, and demographic backgrounds. As noted in Table 1.1, they ranged in ages from 20 to 65, were of various ethnicities, and participants utilise a diverse range of sex/gender and transgender terms including, but not limited to: woman, man, transwoman, transman, transfabulous, sistergirl, brotherboy, genderqueer, crossdresser, and intersex. Furthermore, the sample included participants living outside of the Territory, in remote areas of the NT, and within the residential centre

of Darwin. There is no one singular lived experience which unites all participants, and while it is not my intention to silence individual experiences, at times it is necessary to shift attention from outliers to broader themes which assist in understanding and improving the lives of trans and sex/gender diverse Territorians. Throughout this book, several of these themes are identified from the participants' narratives; this is what this book is about. The remainder of this chapter will review the content of Chapters 2 through 5.

The book

This book presents the results of the online survey and in-depth interviews. Chapter 2 begins with a discussion of trans Territorians' childhoods, including reflections on their first instances of cross-gender behaviour and how their family reacted. The family was a very prominent issue within these narratives: both family of origin and families created through marriage, friendships, and chosen families. At the same time, the absence of relationships and social isolation was also raised. In some cases, despite having support from family and/or friends people felt social isolation because they did not know other transgender people. Being single and going on dates were difficulties for several people. What appeared to underline participants' single status was the remoteness of the NT and the fact that the Territory is very masculine or 'blokey'. In regards to this latter point, there appears to be a reluctance of cismen to openly date transwomen. Chapter 3 explores participants' views of being transgender as well as prominent health issues. Common among participants are problems accessing health services, especially in remote areas. It is the view of participants that health professionals are often temporary residents of the NT and only come to the Territory for training purposes. Furthermore, some participants found medical professionals to be either uninformed about trans issues and/or openly transphobic. Some trans people feel as though they have to educate their doctors before they can access general health care.

Chapters 4 and 5 draw out those issues facing sistergirls and brotherboys. First, these chapters discuss how little is known about Australian trans Indigenous peoples prior to the twenty-first century. The lack of documentation prior to colonisation and in the subsequent two centuries is perceived to be evidence that trans and other queer Aboriginal people do not exist in traditional cultures. Oral histories, however, tell us otherwise. Chapter 4 introduces the origins and the meanings of the terms 'sistergirl' and 'brotherboy', as recounted in the oral history to several participants and the roles they occupy in traditional ATSI communities. Like Chapter 2, this chapter explores the childhood of trans Indigenous people: specifically, the first

instances of cross-gender behaviour as well as family reactions. The chapter ends with a discussion of peer support and the emergence of the trans organisation Sisters & Brothers NT. The founders of the group clearly state that they struggle because of resistance from communities and other advocacy organisations, as well the need for professional paid services. Chapter 5 places greater emphasis on the tensions between being transgender and being Aboriginal. While sistergirls and brotherboys make a distinction between these terms and the western term ‘transgender’, they also desire to transition with medical assistance. This chapter discusses some issues specific to sistergirls and brotherboys, namely racism in predominantly white transgender communities and transitioning with medical assistance, especially for those living in remote areas. The chapter ends with a reflection on the importance of being Aboriginal for sistergirls and brotherboys, namely the role of gendered rituals and spirituality, referred to as The Dreaming. Finally, in Chapter 6, I summarise several of the main findings of the online survey and in-depth interviews and it culminates with a list of 13 recommendations. These are specifically designed to help health service providers, key stakeholders, advocates, and activists in their campaigns to improve the lived experiences of transgender and sex/gender diverse people in the NT as well as sistergirls and brotherboys.

Note

- 1 Ocker is a word that can be used both as a noun and adjective for an Australian who speaks and acts in an uncultured manner.

2 Trans relationships

Although it is not possible to claim that the 26 people you will meet in the next four chapters are a true representation of transgender and sex/gender diverse people throughout the Northern Territory (NT), they do come from a range of identities, lived experiences, relationships, and socio-cultural backgrounds. I argue that this diversity means that this book goes a long way to achieve its primary goal. Since the 1970s, academic and government-funded research into the lives of transgender Australians has often overlooked two communities: transgender Territorians and transgender Aboriginal and Torres Strait Island (ATSI) people. The main purpose of this book is to give voice to these communities and add them to the chorus within the Australian transgender literature. Not unlike transgender Australians generally, there is not one way of being transgender in the NT. However, certain geographic and demographic features of the Territory, such as great distances, sparse population, and high turn-over of residents (especially medical staff), result in some unique issues for the transgender people who live there, such as social isolation and poor health care. In this chapter and the next, the focus will be on those broad issues facing transgender Territorians and will include mention of participants' experiences with partners, family, friends, and the medical profession, as well as their identities and lives as transgender people in the NT. I will defer, until Chapters 4 and 5, a discussion of those issues faced by transgender ATSI people, also known as sistergirls and brotherboys. I make this artificial distinction because the lived experiences of sistergirls and brotherboys are often overlooked in the literature. Thus, it is important to draw out those issues specific to Australia's sex/gender diverse First Peoples, such as transphobia in traditional communities. This chapter begins with a discussion of trans Territorians' childhood. Of course, not all participants lived in the NT as children; nonetheless their experiences as children give a glimpse into the similarities facing all transgender Australians. Another similarity is estrangement from family and relying on 'chosen families'. Yet a prominent issue is social isolation. For example,

those who may have support from family and friends speak of not having other transgender people to talk to. Social isolation also presents itself as a dating issue, more specifically the lack of dating opportunities for transgender people living in the NT. For those participants who are single (especially the transwoman), they refer to the difficulties with dating cis men who are reluctant to openly date trans people because it challenges their masculinity and heterosexuality.

Childhood

A common theme in a transgender person's narrative is recollections of difficulties with their assigned gender at an early age. In Lewins' interviews with 55 Australian transwomen, he observed a dominant pattern of 'the onset of anxiety relatively early, that is, on average at age seven. It was initially relieved by cross dressing' (Lewins, 1995, p. 71). For some transmen, the social role of the 'tomboy', while not universally accepted, at least offered a buffer. Following interviews with 45 North American transmen, Devor notes that, for a quarter, their masculine interests as a child 'were shrugged off as harmless tomboyism and indulged much of the time' (Devor, 1997, p. 102). Yet 16 participants 'described their childhood attitudes toward a girlish appearance in strongly negative terms' (Devor, 1997, p. 102). At this early age, articulating what Patricia (transwoman, 65) describes as a 'strange feeling' was not necessarily possible. Thus, it was in actions that their questions about gender solidified. Nicole (transwoman, 22) and Patricia both preferred to play with girls rather than boys as a child. Nicole says she 'never hanged out with guys even when I was a child' and Patricia says she 'preferred to play with the girls than the boys' and 'they sort of put makeup on me and it felt so much easier'. Similarly, from the age of ten, Belinda (transsexual woman, 37) 'was into doing strange things like making dolls' houses, dressing up dolls, I started crossdressing when I was 12 years old'. This cross-gender behaviour was common in several participants' recollections of childhood. Nicole spent the first 16 years of her life in one of the NT's lesser populated areas and doesn't have many memories of her childhood: 'I don't really have that many, expect for being bullied'. Sarah (transgender woman, 43) was born and raised in Darwin and, when she was four, her mother dressed her up:

As a girl with all this white chiffon curtains, she wrapped me up with this stuff as if I was a Muslim or something. There were these huge pearly clip-on earrings, and a giant pearl broach and stood me on the pool table and took my photo. But I remember getting off the pool table and getting under the pool table, where I used to build cubbies,

and laying down and falling asleep. But dreaming that I was walking up cobbled stone road and I had this white dress on and I had blonde hair and I was a girl. Nobody knew. And it was from that moment on I want to be a girl.

Julia (transgender woman, 29) decided she was a girl at age three. She would wear a tea towel wrapped around her head. When this behaviour was challenged by her mother, Julia responded by saying: 'I'm a girl now'. She went on to say:

I'd always tuck my thing between my legs. I loved Cinderella. I loved Jungle Book. I used to say to mum, why can't I have long hair like [Mowgli]? And she's like, coz he's native and you're not.

She recalls another time, in the 1990s, when her cross-gender play was challenged by her mother:

I found this discarded little skirt and I absolutely loved it. It had this neon belt on it [. . .] and I loved it and I wore it and mum ended up confiscating it off me. I was so upset, I really really like it. It was my favourite thing.

Belinda's crossdressing behaviour was also regulated by her parents:

I was told by my parents I shouldn't be doing things like that [. . .]. That should've sent a message to my parents then, but I don't know it didn't seem to sink in. I tried to tell my mother I was, my mother couldn't understand why I was doing this, so I kept on doing this [. . .] my mother could never accept that I was that way.

During adolescence Leah (transwoman, 52) preferred to stay home rather than go out and socialise, especially when she had an opportunity to crossdress:

I would dress around the house and things like that. At times, I missed out on teenage stuff, coz I'd rather be home coz I knew no one was home and I'd stay home and I'd be Leah. I prefer solitude itself, just away from everyone.

For several people, childhood was a very difficult time and not just because of anxiety associated with their assigned gender. When Sarah was six, her mother died from melanoma and she and her three older brothers were

raised by their father. However, he was away for work a lot: ‘I would run away all the time and I was just a handful, coz he was never there’. She also says: ‘By the time Dad got to me, he was tired. There was no effort, I could see he didn’t have anything left. So, I thought I better look after myself’. At 15 she ran away to a southern capital city: ‘I just ended up on the street’. Similarly, Nell (transwoman/intersex, 53) started to ‘take off’ around the age of eight and would go to either her aunt’s or friend’s house: ‘They were fine with me about being queer’. For Nell, this was a need to ‘take off somewhere else, where I could find some sort of relief’. Nell’s father ‘was a really emotionally insecure man [. . .] very patriarchal [. . .] he was always aggressive, physically violent as well, verbally abusive’. Thus, ‘all my feminine attributes and characteristics were counteracted as I was growing up’. Nell left home permanently at 18.

Family and chosen families

Several spoke of their family backgrounds in quite negative terms, especially when it came to gender issues. Amelia (transwoman, 20) recently came out to her family, but she was worried about her father’s reaction because her:

[f]ather used to beat up people. So, that was pretty scary for me, not straight and not being cis. For as long as I could I just kept it secret and thought it would go away. It just never did.

Mary (transwoman, 20) describes her mother as abusive: ‘My mother is an abuser and did not take well to me coming out as trans’. Mary started ‘identifying as female to myself at 7, but did not come out for fear of domestic abuse and/or being disowned’. Mary’s father is homophobic and ‘did not react well’ and she attributes this to his growing up in the regional area of another state in the 1960s. Having said that, Mary concedes ‘he is trying to become OK with it and is making great progress’. Erik’s (brotherboy, 38) ‘father is accepting and supportive of me’; however, his ‘mother is not and has chosen to have nothing to do with me what so ever’. Julia felt the pull of two cultures as a child; her mother was from a country in South-East Asia and her father was from a Mediterranean country. As a child, Julia would ‘come home from pre-school and put on the clip-on earrings and the little skirt and everything. I did that religiously ever afternoon’. She says that originally, her mother was very supportive of her gender behaviour because ‘Mum is from a culture where it is quite acceptable to be feminine, as a boy from a young age’. However, one day Julia’s paternal grandmother intervened telling Julia’s mother ‘he can’t be doing this all the time, you’re going to raise him as a girl, she said you can’t do that. It’s just not right’. Because

she was alone and all her family were back in the South-East Asian country, Julia's mother reinforced the grandmother's wishes:

So she had to stop it. I remember I was quite upset actually, and I used to make dolls as a kid coz I wasn't allowed to . . . I would make jewellery and dolls, and I'd make jewellery out of rainbow straws and I would make dolls out of anything I could find and doll houses, coz I wasn't allowed to have them. Mum had dolls, those little ethnic dolls, I used to play with.

Although Julia's mother is from a remote area of a South-East Asian country, Julia says that she 'is very modern, she likes everything new' and 'she's always distanced herself from . . . she's a bit of snob I guess'. Whereas, Julia is fascinated by her traditional background and their way of life:

I've got cousins who live a very native life, they climb coconut trees [. . .] some of my mum's sister's kids, who didn't get as good an education as her, live in traditional style home.

There is a contradiction; her mother is a Christian and thinks sex change is a sin but 'she accepts that it is accepted in [the South-East Asian country] and I always bring that up with her'. Starlady (*transfabulous*, 38) also considers 'other' cultures to be more accepting of gender fluidity; she says:

I often find second world cultures a lot more fun and I had a play and a laugh and I have less hang-ups about being trans or being gay, or lesbian, or being creative. Places that I have been like Mexico and Thailand. You walk around on the street, the whole street is interacting with you, playing, laughing, 'oh you look really beautiful'.

The tensions between transgender people when they were children and their parents is also present in Lewins' interviews. He says that 'parental disapproval of effeminate behaviour, and especially punishment from fathers, exacerbated transsexuals' inability to discuss their anxieties with their parents' (Lewins, 1995, p. 73). When Leah came out to her mother, she dressed up for her. However, her response was to call Leah a freak: 'That was the word she said. I thought: "Oh my god"'. This reaction forced Leah 'back into my shell again, after she said that to me. That's what I thought I had to do'. Having said that, Leah goes on to say:

But mum and me have had a good relationship. That didn't damage my relationship with my mother. I was pissed off with her. I don't burn bridges and I don't hold grudges. I just moved on. I told mum, that's it.

Yet difficulties with family is not always attributed to participants' gender. Belinda does 'get along with' her mother, and 'I have told her about my situation, with my gender and I have told her about my everything else', but at the same time she describes her biggest problem as her mother. Specifically, the fact that she:

[b]lame[s] herself for a lot of my health problems, coz I was born premature. So I go a bit easier on her. I try to get through to her that it was not her fault, that I was born that way and a lot of my health problems. I am very careful with how I deal with her, coz she is 75 now. I obviously have to go easy on her [. . .]. In dealing with her, I deal with her in that manner.

Oliver (crossdressing man, 60) felt overprotected by his mother, which he attributes to the death of her brother who turned to drinking after WWII: 'Mum was so concerned that I would go like [my] Uncle that she cotton-woolled me'. He went on to say:

Because she was so protective, girls were out of the picture and all this sort of stuff so umm, the bisexual part . . . actually . . . I had gay sex before I had sex with a girl.

Following the death of her father in 2001, Sarah moved back to Darwin and tried to reconnect with her brothers:

But my family is so distant. We all live in the same bloody town, except for one, who lives in [a southern capital]. They were just all boys you know. Real ocker, motorbike riding, boys. They are alright, we all talk if we run into one another but no, we don't spend Christmas and we don't spend birthdays. No, no BBQs or anything.

Estrangement from siblings was also part of others' stories. Erik's full-brother, half-sisters, and half-brothers 'do not contact or have anything to do with me'. Gabriel (genderqueer, 31) did not grow up with their siblings and they only have 'minimal contact with them online'. Mary's two sisters make some effort; she says her:

[s]econd youngest sister does not understand the concept of being transgender and does not respect me much as a human being, but does make rudimentary attempts to get along with me. My youngest sister also does not understand, but is accepting and is making attempts to respect me, call me by my preferred name etcetera.

Starlady says her sister has ‘become very conservative since her marriage and she perceives me as radical’, yet she was one of the only ones who spoke positively about her parents. She has only recently been out as trans and says that her family has been very supportive:

My family are cool, super cool. They’ve always been very supportive of me, supportive of my work out bush and supportive of my activism and supportive of being trans. They had no idea, when I first said I was trans, they had no idea what trans was. They’re from a different generation, they didn’t understand. So, I had to do a bit of work around that. But, they didn’t care. They just didn’t get it necessarily at the start, and I told them I was trans, they didn’t know. I just was like; I don’t think they get it. So, when I first saw them it was so hilarious, we were at the motel in [a southern capital]. I’m wearing a bra, looking a bit more girly and I’m like: how am I going to do this? And I’m like, I know! Tits out fabulous! I just stormed in, in this dress and go look! My breasts are bigger than mum’s! I’m just like in your face, that’s the only way.

She said she gave her father a book about North American two-spirit people: ‘when I saw him after giving him that book, my dad was like: “Oh I understand it now, I didn’t understand it before”’. Leah’s sister ‘lives in [Darwin] too and she knows. She helps me too. We go shopping together to get clothes’. Felix’s (transman, 29) parents are also supportive: ‘They understand my being transsexual and support me’. Nicole was forced to leave Alice Springs when she transitioned because of threats of violence against her. She moved to Darwin to live with her father who has been very supportive and she says all her family has been supportive of her transition. However, while her father is supportive, he isn’t necessarily someone she can go to and talk; she says: ‘He’s really open to me being a girl. He’s just not the type of person to go and try and talk to him’. Although her mum still lives in Alice Springs, they talk on the phone every day.

The importance of family cannot be underestimated. Two-thirds of the young sex/gender diverse and transgender participants in the *From Blues to Rainbows* (Smith et al., 2014) project who were supported by family ‘fared better on a range of indicators, including their mental health and access to mental health professionals’ (Smith et al., 2014, p. 12). The authors of the *Private Lives 1* project (Pitts et al., 2006) claim that while family is important for younger queer people ‘it becomes less significant for those over 50 years who are possibly more confident of the friendships and relationships they value more strongly’ (Pitts et al., 2006, p. 62). For some transgender people in the NT, family also included their partners and children.

Following the now famous case of *Re: Kevin* (2001) transgender persons can marry in Australia; however, at the time of writing, because same-sex marriages were not legal, if someone is already married they are first required to get a divorce. This legal requirement does not mean that partnerships or the love end. Alegría (2011) states that ‘contrary to what might be popular belief, couple relationships can be sustained following a partner’s disclosure of transsexualism’ (p. 143). Patricia was married to her first wife for 17 years, at a time when she struggled with her gender identity, keeping it secret and drinking a lot. Although she told her first wife about her desire to live as a woman, they separated in 1995. Patricia’s relationship with her current wife is very different. They have known each other for 40 years:

I sat down with her when we started to get together. I said, look, this is the way I feel and I want you to know before we get together. So, if you want we can stop now or if you really really want to, you can come on the journey with me. She said I want to come on the journey I want to see you happy. So, we got together in 1997 properly. She’s been very very supportive.

This disclosure of gender identity prior to the development of a serious relationship is not uncommon. Bischof and colleagues (2011) found that half of the couples they spoke to had discussed the man’s gender identity while dating. Leah told her wife over 15 years ago she was a crossdresser: ‘I never said I really wanted to be a woman’. However, this changed five years ago: ‘That’s when I told her this is really how I feel. A lot of tears and crying then’. Since then, Leah has now made the decision to transition and had only recently reached out to a gender clinic. The impact on Leah’s wife has been less than when she came out, but Leah says: ‘It’s hard, it’s not easy. It’s such an odd, strange thing. But it’s true in my life, it’s how I feel’. Leah also says: ‘She’s not in denial, but it’s hard, it’s hard coz her husband’s going to be a woman. It’s not an easy thing. It’s embarrassment for the wife’. Leah had started the process of transitioning several times before, but life events got in the way. She says: ‘I’ve done it quite a few times in my life and other things happen. I was living with a lesbian for a year and I was a female after hours. Did boys’ things during the day’. Yet her daughter gave her a house:

I had no money in the bank or anything. And here I was given a house, so I thought I’ll be a guy again. I’ll fight it. I’ll be right. I went through the same emotions and purged the clothes.

Lewins (1995) describes this as ‘delay’ which is a common feature of many trans biographies in ‘becoming a woman’. Afterwards, Leah met her current wife and had kids; describes it as ‘probably one of the most

wonderful things in my life, relationship wise. It's been like two women living together'. When Leah talks about her wife and how she is dealing with her transition, there is ambiguity, using words such as 'odd', 'strange', and 'it's sort of surreal'. Leah concedes: 'I've got to give her time, she's got to get her head around it'. In her interviews with spouses of transgender people, Chase (2011) observed that:

They appeared to be so overwhelmed and confused at times that they could not seem to think clearly or know their own thoughts as separate from their spouses'. They said things that did not always seem to make sense.

(p. 444)

Leah notes that, on the one hand, 'We're behaving with each other as if nothing has changed', but on the other hand, the little emotional and sexual intimacy that was part of their relationship has stopped: 'We're not really touchy-feely. She never was. I was always touchy-feely with her. Now that's stopped totally'. Leah describes it as 'like having two women cruising along together. We cruise'. Since being interviewed, Leah has sent me updates, for example she is now on hormone replacement therapy. Also, while she describes things at home as 'painful', she also said they are working on it. Oliver is divorced and is still on talking terms with his ex-wife: 'Well, there is no animosity or anything there, we don't see each other very often, but there is no problem'. Felix and Ivan (transman, 47) describe themselves as polyamorous and Ian lives with two partners. Amelia is in a relationship: 'My girlfriend is quite supportive'. They met at university:

One day we were alone and I told her. Not only was she instantly supportive, she had known me for half a year. It was easy for her to forget the identity she knew and build this new one. And that was very validating and I am so pleased she did that it made me a lot happier.

Nicole had been in a relationship for three years prior to her transition. While they had made plans to continue the relationship following her transition, it did not survive. Nicole's ex-partner had moved to a southern capital city, and Nicole planned to move with her. They had rented a property together, yet on Nicole's birthday they both realised that it would not work out. She says:

I was going to move down with her and everything. I am still on the lease. I am happy to pay for it, as I did sign the lease. We sort of walked out the house, holding hands. We saw our reflections in the car window and we thought, no this is too different.

They have remained friends and they talk every day. Nicole says they get along so well because her ex-partner ‘doesn’t really identify with the female gender, she’s not transgender, but she’s more manly than most women. It was sort of a compromise’.

Dorian (transman, 57), Felix, Ivan, Justin (transman, 33), Oliver, Leah, and Patricia all have children. Felix is ‘the biological mother of two children’ and, similarly, Ivan ‘describes himself as her biological mum but she calls me dad’. Justin’s partner ‘gave birth using donor sperm and I am his parent on his birth certificate’ and they have another child on the way. All Oliver would say was that he is close with his kids. Leah’s children are still living at home and she has not discussed her gender transition:

My children don’t know yet, and that’s going to be my hardest hurdle. I love them until the cows come home. I don’t want to lose them, so I’ve got to be really careful.

Lewins (1995) observed that among the transgender women he interviewed, half of those who had children ‘described some equivocation about acting on their transsexuality because of the fear of being shunned and because of the doubts and guilt feelings’ (p. 85). Patricia and her wife had discussed her gender transition with their children:

We just decided we were going to tell the kids and they were a bit iffy on it and when I started to tell them what happened a few years ago, especially with my boys, then they understood [. . .] they were very supportive.

When it comes to psycho-social and emotional support, most participants spoke of ‘chosen families’. In research on queer Australians, the *Private Lives 2* (Leonard et al., 2012) project revealed that 73 per cent of people ‘would turn to GLBT friends for emotional support’ (p. 24). Friendships in the lives of queer people, including transgender people, often take the form of more traditional familial relationships. Galupo and colleagues (2014) state that these friendships are ‘often characterized as providing a unique type of familial support [and] function as “families of choice”’ (p. 2). Estrangement from families and often the overt rejection from families means that queers make their own families. This sentiment is held by Amelia: ‘Family isn’t really who is blood related to you, but who is actually your family. They’re like: “You can’t choose your family”. I’m like: Watch me!’.

Leah has come out to a dozen of her friends, which she calls the ‘inner sanctum’, and ‘no one has rejected me yet. They love me’. She went on to say: ‘We’ve had crying, even some of the guys have been crying. They get the drift. Of what is happening’. Leah has observed that women are more

accepting than men and she recollects how she was afraid of coming out to one of these men:

After I had explained everything he looked at me and said: ‘Are you gay?’ And I thought: ‘Oh my god. I’ve just told you’. He’s finding it really hard to get his head around. He’s a very dear friend of mine. He’s been a male motivator for me over the years. I think it’s rocked him that I’ve come out after all this time.

Leah doesn’t think this support would have happened when she first desired to transition in the 1980s: ‘I think I would have lost my friendships. Now we’re all mature, and society as a whole is more mature about these sort of subjects it’s become more acceptable’. Because things at Leah’s home are tense, she relies on a friend: ‘I have all my makeup at his place. Not at home. So, I can just go there and get ready’. She also relies on a friend who works at a laser clinic to help with her makeup: ‘She’s been looking after me and doing a proper job. Helping me with makeup. Being smart about my makeup’. Belinda also believes things are very different from ten years ago:

One thing absolutely surprised me, I think it might be because I might be getting a lot older I don’t know. One thing that has surprised me a heck of a lot over the last ten years, from say 2007 to 2017, is the fact that since I come out of my shell. What surprised me the most is how much people have a much greater understanding. It seems to me that people have changed a lot in the last ten years. There seems to be a much greater empathy and understanding than there was ten years ago. They seem to be much more aware and educated.

Amelia’s friends have been very supportive and she also speculates there is a generational difference:

I have noticed that some of, basically the younger, my peers and stuff, this generation, they meet the standards of human decency much better. Some of the previous generation are like, that’s weird.

Nicole came out on Facebook in early 2017 by closing down her pre-transition account and opening a new one in her affirmed gender and name; she says she:

[p]ut a big message and a tag of a new Facebook page, saying: ‘If you’re OK with this, it would be good to keep friendships’. [. . .] I deleted my Facebook account. It was the best feeling.

When taking into consideration the journey through childhood and the current relationship with family and friends, there doesn't appear to be a shared experience. However, there is a tendency for transgender people to be estranged from family and despite support from friends there is a distance within these friendships. As will be explored in the next section, there are some patterns of social isolation, especially when it comes to having other transgender people to talk to and dating.

Social isolation

In my review of the Australian transgender literature (Kerry, 2014), one of the key findings was that a high proportion of trans people experience social exclusion and isolation. In the *Private Lives 1* (Pitts et al., 2006) project, while transwomen and transmen both experience social exclusion, transwomen are more likely to experience social exclusion (56.1 per cent) than transmen (44.1 per cent). The authors of the *Mental Health Study* (Hyde et al., 2014) observe that 'the multiple ways discrimination and harassment play out in their lives [...] often result in social isolation' (Hyde et al., 2014, p. 46). Several of the people I spoke to mentioned not knowing other transgender people and that this leads to a feeling of social isolation. For many transgender people, regardless of how supportive (or not) one's family and friends are, there remains a need for other transgender people to talk to. Nicole knows only one other trans person: 'She is through her transition and I was really amazed by her'. She inspired Nicole: 'This is possible'. But because she had to leave Alice Springs, she had to leave this and other friendships behind. She says: 'I wanted to stay, coz I have a lot of really good friends in Alice, and I am upset to leave'. Peer support is a very common need for queer and transgender people. Pflum and colleagues (2015) note that transgender people 'seek support from similar peers to normalize and validate emotional experiences related to discrimination. However, not all [transgender] people have equal access to similar peer networks' (p. 282). Belinda has relied on herself to get much information about trans; however, she says: 'I did get in contact with a sex worker, who came through town not long ago, she knew a lot of about this stuff. She gave me a whole heap of information about people to contact'. However, Belinda has mostly been on this journey alone: 'I struggle on a personal level. Not only years, but decades'. She goes on to say:

You end up having to work on yourself and end up finding specialists on your own. It doesn't help when you are struggling mentally as well. When you go through a lot of this by yourself, it's not helpful at all.

When asked about her¹ needs, Hamilton (FtM, 37) stated, ‘to be around others like me – queer, weird. I feel like a fish out of water around “straights”’. She goes on to emphasise that ‘isolation is a killer’. Patricia relies on seven or eight friends who meet up in a southern capital city: ‘I only see them every six months and we discuss on Facebook’. When they do get together they ‘just talk about our experiences and how things are going and the way we are living’. Similarly, Leah also goes to a southern capital city to socialise: ‘Went out to a nightclub, went to the city, had wine at [dining district], met some friends, all as Leah’. Leah has been to Throb, Darwin’s only gay nightclub, as Leah; this was when she first arrived: ‘Now I’ve got to be more careful with what I do’. Having said that, she admits: ‘I still go out in the day time some times’. Sarah is of the view that ‘you don’t see a lot of transgenders around’. Agreeing that they leave for medical reasons (which I come back to later), she says: ‘There is nothing here. The ones that do stay are usually the ones who are born here and have that connection’. Sarah also thinks that those who come to the Territory are ‘married or living a straight life. Or don’t walk around with transgender on their forehead’. In Lewins’ (1995) study one participant retorted: ‘I’m not a transsexual, I’m a woman’ in response to which Lewins suggests this may be a common sentiment for why transgender people do not get involved in transgender groups (or trans research). Sarah says that not only are transgender people in the NT stealth, they do not get involved in queer activities, such as the Pride festivals, and perhaps there is not enough to form a social group. When I asked Leah if she knows of any groups in the NT, she said: ‘I looked in the phone book and there doesn’t appear to be anything. [. . .] I’ve struggled to find any information for anyone up here’. Patricia has also struggled to find transgender-specific support in the NT:

We haven’t got any transgender support network up here. You’ve got your gays and lesbians, and there are a lot of crossdressers who don’t go out, that I know of. They just do their little private thing. They don’t come out and mingle. We have no support up here.

In early 2017, Headspace, one of Darwin’s mental health services, organised a support group for LGBTQI youth called Prism. When I interviewed Nicole, she told me she was going to attend their next meeting, and she emailed me afterwards to tell me there were no gender-diverse people in the group, but she was optimistic about the group. In her interview, she had said:

I think it would be a lot better if there was just a transgender support group was out there. I have only met one other transgender person and I

am struggling to find other transgender people. I know they are around, but I just don't have the support.

In addition to the annual Pride Festivals in Darwin and Alice Springs, there are three queer organisations; one, the NT AIDS and Hepatitis C Council (NTAHC), is government funded and the other two (Rainbow Territory and Sisters & Brothers NT) are volunteer run. Sisters & Brothers NT is largely based in Alice Springs, focuses specifically on transgender and sex/gender diverse people, and was founded by several participants in this study. When I asked Sarah about whether Sisters & Brothers NT is meeting a need in the community, she said:

No. Not at all. It's about Aboriginal. It's basically for Aboriginal and Torres Strait Islanders. It's not for the normal transgender or anything. Not at all. They say it is, but it's not.

Felix and Ivan both speak of informal groups of transgender men in Darwin, who get together and support each other. Felix describes it as 'small private groups of trans friends that catch up to offer support', and Ivan says: 'I have lots of FtM friends in the NT and we're all doing well here'. Amelia had only just discovered that a school friend is also transgender: 'I don't know why she didn't tell me, we would've been able to hold each other up. She told me last week. Now that I've got an idea . . . she's pre-transition. I can help her'. The authors of *From Blues to Rainbows* (Smith et al., 2014) stated that 77 per cent of their participants 'found their peers to be a good source of information and also a support in knowing that they are not alone in many of their experiences' (p. 84). Similarly, Robinson and colleagues (2013), the authors of *Growing Up Queer*, make it clear that despite access to information and support online 'participants strongly indicated the significance and importance of face-to-face contact with other young' queer people (p. x). Unfortunately, Amelia's friend still lives with her parents in the same remote part of the NT, 'but I can't actually be there to help her out. If I lived where she is or she lived here, I could say my place is open'. As will be discussed later, the fact that the NT is large and sparsely populated has an impact on many transgender people.

Dating

Research reveals that many trans Australians are single. For example, the *Mental Health Study* (Hyde et al., 2014) reports that almost half (n = 458, 48.4 per cent) of participants were single. Furthermore, both *Mental Health Study* (Hyde et al., 2014) and *Private Lives 1* (Pitts et al., 2006) state that transwomen are more likely to be single (54.4 per cent and 62.1 per cent,

respectively) than transmen (47 per cent and 47.1 per cent, respectively). According to *Private Lives 2* (Leonard et al., 2012), transwomen were also more likely to be single than lesbian and bisexual ciswomen and gay and bisexual cismen. Being single is a function of social isolation and the difficulties of dating were prevalent among the transwomen in my study. When asked about relationships, Sarah said: ‘I don’t have one. I don’t think I’ll ever have one. [. . .] If it comes along. It will come along. I won’t go out looking for it. I live with my cat’. Belinda’s last relationship ended when she was 30; at that time she came to realise that she wanted to try harder to ‘please everybody’, that is, be a straight man. She says:

I ended it because I made one go at trying to change my lifestyle and try, I don’t know why, I guess I was trying hard to please everybody and that was a mental breakdown I actually had, coz I still thought I should try and do the right thing, in my strange mind at the time, in thinking I wasn’t doing the right thing and I don’t know why I was thinking that.

Belinda identifies as bisexual and she implies she has physical characteristics, such as a small penis, which makes penetrative sex impossible. She goes on to say:

I do have breasts, there is not much down stairs, I can tell you that much. I can’t actually penetrate anybody. That is the other issue I actually have. As far as sex is concerned, I have had situations where I enjoy sex from both males and females, but they have to penetrate me. That might sound bizarre [. . .] it’s the only way I can have sex. I am very much female.

Oliver is also bisexual and he crossdresses. He only has sex with men while he is dressed as a woman. I will explore his experiences with gender identity in the next chapter, but for now I wanted to raise his views regarding dating or, more accurately, sex. Oliver prefers to call his relationships with men as ‘encounters’ whereby ‘they come to my place or whatever, we have sex, they go home. There’s no emotion, which is the way I do want it’. When he has sex with men: ‘I do like to be the bottom, I do like to act the part as a female and be what a female would do for a guy’. He specifies that these men are bisexual, not gay, some of whom are married, and during these encounters he is always Olivia. In his early years, Oliver met men through the beat culture but now:

I’m not a real fan of doing the beats because they are a bit dangerous, but I have been known to do the beats, but, plus here in Darwin it’s just too small.

He meets these men on bisexual dating websites. He said there used to be a sex-on-premises venue (albeit covertly) associated with a sex shop, but Darwin is ‘such a small place and somebody would see you going in or coming out or whatever’. Oliver also sleeps with women and describes these experiences in a completely different way than the ‘encounters’ with men: ‘With most of the women, it’s more companionship, it’s more of a relationship or good friendship’. During sex ‘when I’m with a woman, I completely switch and be totally a bloke [. . .] I like to do the pleasing’. He reflects on a comment one sexual partner said to him; she said: ‘You can almost be a lesbian do you know that? You do everything [. . .] you like doing things that girls would do to girls’. After they had had sex he started to talk to her about his ‘desire to crossdress’, to which she replied: ‘I can understand that, so yeah’. This observation indicates that Oliver’s gender identity, ‘desire to crossdress’, is not limited to sexual ‘encounters’ with men – a point I will return to in the next chapter.

Many transwomen in the NT are single and dating. Starlady, who has since left the NT, said one of the reasons she was thinking of leaving was ‘it’s impossible to get a date in Alice Springs because of the stigma around dating trans people’. She speaks of the stigma attached to straight cismen who openly date transwomen: ‘People are shaming them for being attracted to transpeople. Not only are we being shamed but the people who are attracted to us are shamed’. Julia also talks about stigma: ‘A lot of guys are ok with you, if you’re discrete. Not many would openly date transwomen. They’d happily sleep with them’. Brianna (sistergirl, 32) is also of the view that ‘it can be very hard for trans women to even date, to find somebody to love. Finding a partner who identifies as a cisgender straight male who doesn’t care’. She goes on to say that ‘a lot of men don’t want to be seen with transwomen in public or people knowing about it. They keep it hidden. I think they are afraid of being judged’. According to Brianna, they are afraid of being seen as gay. Her current partner was asked if he was gay and some people said to him: ‘I didn’t know you were gay’.

While there are some studies (usually in to context of HIV/AIDS) into why cismen are attracted to and/or have sex with transwomen (Blanchard & Collins, 1993; Bockting, Miner, & Rosser, 2007; Operario et al., 2008), very little has been done in regards to openly dating transwomen. Weinberg and Williams (2010) suggests one of the reasons for this ‘is due, at least in part, to the potential stigmatization of the non-transgender person if such sexual relationships became known’ (p. 382). It is not too far a stretch of the imagination to consider that straight cismen are reluctant to openly date transwomen because their sense of self, as straight cismen, is bound to the constraints of ‘hegemonic masculinity’ (Connell, 2005; Connell &

Messerschmidt, 2005). In Flood's (2008) study of Australian men, he observes that straight cismen who spend time with ciswoman partners and, in doing so, sacrifice time with their straight cismen 'mates' are, ironically, more likely to have their masculinity and heterosexuality called into question. Thus, if spending too much time with ciswomen, even in the context of a heterosexual relationship, can undermine masculinity and heterosexuality, then openly dating a transwoman is clearly going to be a problem. Julia has been 'getting with' one guy in the regional area of another state who said to her: 'I would happily date you but I don't want my friends to know you're trans'. Starlady is fed up with this duplicity:

This effects our personal lives and that effects how we can find love in this world. I think it's a really essential thing for your wellbeing and so I found my wellbeing was impacted upon, even though I'm very accepted and loved in Alice Springs. It's like, my wellbeing is effected because I can't find love and intimacy and that is an essential part of being human and I deserve that and I want that. So, I'm like okay, you're going to have to go because I can deal with that for six years and now I'm over it.

Julia is happy being single, especially after ending an eight-year relationship, but: 'I'm open to whatever. Eventually I would like to date. Openly. Publicly'. Like Starlady, Julia says it 'doesn't make you feel very good when you're only desired, loved in private. It's not good for our self-esteem'. Nell lives in Alice Springs and hasn't had a date in three years; she says: 'So yeah, that's been the hardest part of living here, the isolation and the attitude'. Not unlike Starlady, Nell is surprised by this 'especially being a social person and being used to attention, like socially in the city and then you come here and it's like, oh, it is a fuckin' desert'. There is not only a dearth of opportunities for these transwomen to find dates, but there is also open hostility. Julia relayed several stories to me about straight cismen's negative reactions to transwomen. One pertained to a conversation she had had with a 'friend of a friend'. He first prefaced his comment by saying: 'I've got nothing against transpeople, or gender diversity', yet he then proceeded to say to Julia: 'But, if I got with a girl and found out she was trans I would probably beat her or fucking kill her'. Understandably Julia was horrified by this disclosure: 'In his mind he thinks it should be illegal for transpeople not to disclose that they're trans to men, coz it could psychologically damage them'. She was so concerned she asked me if a trans person, legally, must disclose their trans status. They do not have to do so. Julia said she does 'disclose the fact that I am trans, because it's my

choice. Also, I don't want any unexpected things'. She went on to share a second experience with a straight cisman, who:

[b]ought me a drink and we were dancing. I ended up going home with him. I just assumed he knew. I know that was bad of me, coz I just thought it was obvious. But then, in the morning, he was surprised. And I don't really know where that came from. He was fine. He stayed for a few hours. And he said, he didn't know and that in the future you should tell guys. Because . . . I'm ok with it, but I'm not sure a lot of straight guys wouldn't be.

Abuse and violence remain significant issues for trans Australians. The *TranZnation* (Couch et al., 2007) project measured 'experience of discrimination or stigma on the basis of gender issues', and the authors observed that '87.4% [of participants] had experienced at least one listed form of stigma or discrimination' (p. 9). They go on to report that the most frequent type is 'direct personal insults or verbal abuse' (53.4 per cent), followed by being 'excluded socially or ignored' and 'rumours spread about you' (47.4 per cent), and 'threats of violence or intimidation' (33.6 per cent). Additionally, the authors report that 18.6 per cent of participants experienced 'physical attack, or other kind of violence', 11.5 per cent had been sexually assaulted, and 9.9 per cent had been raped. In the *Mental Health Study* (Hyde et al., 2014), 48.7 per cent (n = 461) had experienced 'discrimination and harassment' in the 12 months prior to the survey, 16.1 per cent (152) had experienced 'discrimination and harassment', and a further 31.3 per cent (296) had never experienced it. Of those who experienced 'discrimination and harassment' in the prior 12 months, the group most affected were transwomen (n = 241) which was over twice as many as those in the next affected group: transmen (n = 107). Furthermore, the authors reveal that 'an alarming 76.3 per cent (n = 468) reported that they had changed their activities or behaviour to avoid further experiences' (Hyde et al., 2014, p. 45). The authors of *Female-to-Male (FtM)* (Jones et al., 2015) indicate that discrimination among their participants occurred in encounters with cismen 'who were trying to get them to prove their masculinity' (p. 92). Julia has been threatened online. On her online dating App account she is out as trans 'because there was one incident where someone asked if I was trans [. . .] and in the next part he was talking about cutting up body parts'. Although she blocked him, she said: 'The reality is, that transwomen do face that a lot'. On another occasion, in Alice Springs, a straight cisman said to her: 'If I see you down the street I'd get a gun and I'd shoot you dead'. I pause to mention that, while there is considerable violence against transgender people, as indicated by the annual Transgender Day of Remembrance, which

occurs on 20 November, I mention Julia's experiences because they illustrate a darker side to dating for transgender people, especially transwomen. Not being able to find a date in the NT is not necessarily associated with it being sparsely populated because, as several say, they can get dates. The problem is the reluctance of straight cismen in the Territory to date transwoman openly.

Conclusion

Trans Territorians experience issues like those elsewhere in the country. Childhood and family life consists of negative and positive experiences and many speak of cross-gender play at an early age. For those who are estranged from their families, there is an emphasis on creating new families through friend networks. Having said that, one of the pressing issues of those who live in the NT is social isolation. Some trans Territorians say they do not know any other transgender people they can talk to. Some informal social networks do exist, but this appears to be only in Darwin, and others have friends who live outside the NT, but this means they must rely on the Internet and interstate travel to maintain social connectivity. Another pressing issue concerning social isolation is dating. Several transwomen discussed how cismen are reluctant to date them, openly. Although this is not just a problem limited to the NT, key demographic features, such as being perceived as having 'frontier mentality' and as being homophobic as well as being male dominated and possessing a 'workman culture' means it is understandable that pressures of hegemonic masculinity would be overly represented. The relationships transgender and sex/gender diverse people have with family, friends, and lovers appear to be heavily influenced by life in the NT. In the next chapter, the impact of living in the Territory will be further explored in relation to being transgender and accessing health services; additionally the chapter will discuss what transgender people think about living in the NT.

Note

1 Although Hamilton identifies as FtM, she says: 'I don't identify as a man and prefer to be called she'.

3 Being transgender

The term transgender is widely used as an umbrella term to cover a large array of identities, behaviours, lived experiences, and desires. Feinberg (1996) suggests the term includes:

[t]ranssexuals, transgenders, transvestites, transgenderists, bigenders, drag queens, drag kings, crossdressers, masculine women, feminine men, intersexuals (people referred to in the past as ‘hermaphrodites’), androgynes, shapeshifters, passing women, passing men, gender-benders, gender-blenders, bearded women, and woman body builders who have crossed the line of what is considered socially acceptable for a female body.

(p. x)

Yet the term is not always appropriate for some people – for example transgender Aboriginal and Torres Strait Island (ATSI) people have stated that it does not reflect their ‘culture and lived reality’ (Brown, 2004, p. 25). While I have persisted in using transgender as an umbrella term, I do so cautiously while aware of its inherent problems. I begin this chapter with a discussion of the various terms employed by transgender Territorians to describe their gender identities and their transgender histories. What is also essential in this discussion is an understanding of the diverse ways trans people in the Northern Territory (NT) ‘do’ (West & Zimmerman, 1987) their gender. As a direct result of this diversity, many participants spoke of the difficulties they have with the medical profession who often have stereotypical knowledge of transgender people. Another significant problem that many transgender Territorians face is access to health care, especially ‘out bush’;¹ as described by Catherine (sistergirl, 30). Almost universally, the problem with health care is a push factor for trans people leaving the NT. As Sarah (transgender woman, 43) says: ‘Yeah, a lot of them do eventually leave. Because of medical reasons. There is nothing here’. For example, Julia (transgender

woman, 29) says: 'I feel like there's not enough resources here. And I'd be better off going to [southern capital city] for that'. Indeed, not only were several people no longer living in the NT, a few have left since their participation. Following this discussion, this chapter also explores what life is like for transgender people in the NT and how its unique features, such as geographical distance and sparse population, impact upon the lives of those who live in the Territory.

Being transgender

Many people do not describe themselves as transgender. They are men and they are women. When asked to choose their gender, several said they were either 'men' or 'women'. Sarah is one of them; she says: 'I am a woman when I walk out the door. I am a woman when I am at home. [...] I've never had it written across my forehead'. Others included Brendan (transgender man, 39), Dorian (transman, 57), Felix (transman, 29), Leonard (crossdressing man, 59), Julia, and Oliver (crossdressing man, 60). Research into the lives of transgender people is inherently biased against those who, once they have transitioned, no longer wish to discuss it. Lewins (1995) refers to the final stage of 'becoming a woman' as 'invisibility' and in this stage some people keep their transgender history private: 'Not that these transsexuals did not or could not tell anyone about their transsexuality. Rather, it was that they did not need to' (p. 107). While, for some, the purpose of being transgender is to transition from one sex/gender to the other, and thereby live as men and women, there is much diversity, such that people may be at different stages of the journey or on different journeys altogether. Often, I have turned to Lewins' (1995) proposed model of 'becoming a woman' as a way of understanding the lived experiences of transgender Territorians. Not only is this problematic because it excludes transmen, but also, as Perkins (1996) has observed, social researchers need to 'move away from the influence of the clinic and go onto the streets' (p. 21). Nonetheless, I have persisted with his model because it offers a useful framework for this project, that is, it assists in illustrating the diversity amongst the participants. Lewins' (1995) stages are abiding anxiety, discovery, purging and delay, acceptance, surgical reassignment, and invisibility (p. 70). In the previous chapter, while discussing childhood, many people spoke of how they struggled and this is clearly aligned with 'abiding anxiety' in Lewins' model. He defines 'abiding anxiety' as experiencing 'uncomfortable, and at first, inexplicable feelings about sexual identity and gender' (Lewins, 1995, p. 71). When taking into consideration 'gender dysphoria', that is, the medical term for transgender, it is not surprising that anxiety is a primary part of the early stages of being transgender. The American Psychiatric Association's *Diagnostic and*

Statistical Manual of Mental Disorders (DSM 5) defines gender dysphoria as being ‘associated with clinically significant distress’. This distress may be because of assigned gender, genitals, and/or secondary sex characteristics. When Sarah was young she was ‘ashamed of what I had’, referring to her genitals. Leah (transwoman, 52) also says:

When I look at myself in the mirror, I loathe anything male about me. My penis, it’s like, what is it doing there? It doesn’t look right to me. It’s this appendage which, why have I got this bloody thing?

Lewins (1995) observed that anxiety was sometimes ‘relieved by cross-dressing’ (p. 71) and while some experimented with gender play in childhood, it also provided relief for those who, in adulthood, had delayed their transition. Patricia (transwoman, 65) would ask a hair-dresser friend to assist her to dress in her affirmed gender, declaring: ‘I need to look like a girl’. Although she knew it was not the time for her to transition permanently: ‘I felt so comfortable when I did’. Like many transwomen, ‘I started as a cross-dresser with the other girls’. In the 1970s, the Seahorse Society, the first Australian transgender organisation, was founded. While it was primarily for heterosexual men who crossdressed, interviews conducted by psychologist Neil Buhrich (1976, 1996; Buhrich & McConaghy, 1977; Buhrich & Beaumont, 1981) revealed that some members wanted to live permanently as women. Lewins (1995) states, in his model of ‘becoming a woman’: ‘Some do not go beyond the first couple of stages in the series’ (p. 70). In Chapter 2, I introduced Oliver, who is a man who crossdresses. Arguably, he, not unlike the Seahorse Society, falls outside of the scope of being transgender; however, in my interview with him, Oliver makes it clear that if he could he would live full-time as Olivia. He declares: ‘I . . . probably . . . it’s easy to say yeah, I’d love to do it full time [. . .] it would be nice to turn around and say I’d love the operation’. Having said that, Oliver repeatedly dismissed the possibility of living full-time as a woman: ‘But not here obviously’, ‘well I’d like to be, but I can’t’, ‘but I know I can’t’, ‘it’s not a possibility’, and ‘it’d be very very difficult’. When we discussed the term ‘crossdresser’, Oliver was unsure whether the term was appropriate because:

I can’t really be classed as a crossdresser because I’m not, [. . .] okay, a bit of a crossdresser but when I’m in bed with a bloke, it’s being a woman, it’s more that probably than being dressed as a woman.

It is when he has ‘encounters’ with men, when he has sex with men, that he *is* Olivia. I asked him, is it the desire to have sex with men or the desire to be Olivia? And he replied: ‘It’s probably more to be [Olivia]’.

A few participants mentioned the realisation they are transgender. When Amelia (transwoman, 20) was six years old she ‘had access to the Internet. As soon as had that I started Googling why do I feel like this?’ Nicole also used the Internet; however it was when she was in her late teens. She says: ‘I was trying to work out why I was so upset’. She came across ‘people on YouTube with the same feeling as me’. Similarly, Belinda (transsexual woman, 37) ‘had to get online’ because there was no other support to turn to; she says: ‘I’ve had to do all my own research and all my own facts’. As such, this coincides with Lewins’ second phase of ‘becoming a woman’, that is, ‘discovery’. However, I wish to move onto Lewins’ next phase, ‘purge and delay’, because once a person has knowledge and some understanding of why they feel the way they do, this doesn’t automatically lead to living in one’s affirmed gender, nor does it stop the anxiety. Many participants spoke of the difficulties between coming to the realisation they are transgender and doing something about it. Leah mirrors the same language Lewins uses, describing the desire to live as a woman as coming ‘in ebbs and flows my whole life. You purge your clothes and start again’; she goes on to say, ‘I’ve dumped my makeup, my jewellery, and clothes so many times in my life. And then two weeks later I’m back into building it up again’. She refers to one of the times she delayed the transition, by stating: ‘I’ll be a guy again, I’ll fight it, I’ll be right’. Leah says that during these times she has ‘been very stealthy and keeping it to myself. It’s one of the parts of being transgender, it’s a lot to do with stealth’. Belinda ‘purged’ by ending her homosexual relationship with a man and taking testosterone; unfortunately that is ‘when I started having these serious health issues’. Lewins (1995) notes that ‘marriage was a principle mechanism of purging’ (p. 78) and the marriages of both Leah and Patricia acted in this way. Patricia speaks of this time:

It was a long hard journey, with my first wife, I sort of kept it from her, and the two boys with her. I was drinking a lot, and away from everybody. I sort of kept to myself. I wanted to be alone, alone with my own thoughts. Put it that way. I’d just go out the back, down the shed and think. I just thought and thought and thought and I didn’t feel I was myself. I didn’t feel right. If I can put it that way. As the years got on, it just got stronger and stronger, up to the point I just had to do it.

Julia was in a relationship for eight years, and even though they were living in London and it was ‘part of the culture, at the time’, Julia’s boyfriend ‘really wasn’t that comfortable with me fully expressing my femininity. Coz he often used to say: “I’m attracted to you coz you’re a boy”’. Thus, Julia ‘felt like I had to toe the line’. And it was not until they broke up when she ‘started exploring my gender identity’. She is at a stage where she is

increasingly living in her affirmed gender, yet continues to work as a boy: 'I can't be who I am at work, I don't feel confident, comfortable at work'. It is the beginning of acceptance for her.

Most participants were in the 'acceptance' and 'surgical reassignment' stages and, as the names imply, they were no longer in denial and had taken considerable actions towards living their affirmed gender. These actions included changing official documents, hormone replacement therapy (HRT), and sex reassignment surgery (SRS). For example, Erik (brother-boy, 38) has changed 'all legal, medical and social documents, birth certificate, Medicare, government, driver's licence etcetera'. Nicole, who had only recently started living full-time, was very happy about her transition: 'I am a lot happier inside'. She also considers herself 'pretty lucky, I do look pretty female, I pass pretty well'. When Sarah left home at 15, she moved to a southern capital city and once there:

I walked into a nightclub, just as a girl, coz it made me look older, and there was a show on, it was a gay club, and there was a show on. And they were just beautiful and they had breasts and I just couldn't fathom how they had breasts. They said they took tablets. I thought, Oh my goodness. And the next day I went out and found these tablets. And I never looked back.

Getting access to 'tablets' without a doctor's prescription shouldn't be dismissed as a thing of the past because one participant (who didn't want their name associated with the fact) is currently self-medicating hormones without a doctor's approval:

I shouldn't be doing it, but I know how to do it, so why not? I have acquired hormones from a source, I won't say where, I have been injecting [one hormone] weekly into my thigh and I have also been taking [another hormone] every day, an anti-androgen, well it's actually a diuretic. It's prescribed off-label as an anti-androgen.

Similarly, Amelia said: 'If I could prescribe myself, then I'd already be doing it'. Nicole had just begun her journey transitioning with medical assistance, having been living full-time only in the few months before her interview. She had her first appointment with an endocrinologist the day I interviewed her and 'really it's about finding a psychologist; someone I can talk to. And for top surgery I have a consult in March and in a couple of years' time I will be thinking about bottom surgery'. Belinda had been taking testosterone for seven years to make her look more masculine; she stopped a few months prior to her interview, and she says:

I've lost a heck of a lot of weight. I've lost half my body size. I've gone back to my own natural feminine way in which I am down to where I was.

Not everyone who is taking HRT has had SRS. Two transmen, Felix and Ivan (transman, 47), do not intend to have hysterectomies because, as Felix says: 'I want to keep my reproductive bits in case I want more children'. Sarah did not have SRS when she was younger and she says young people can be impatient to have surgery: 'As soon as they take the hormones they want to have the sex change'. Similarly, Julia says:

There is a lot of pressure on transwomen to have surgery to be accepted as women. A lot of people don't realise that you can live as a woman and still have a penis.

According to Sarah, young people should wait:

[c]oz you lose a lot of your sexual drive after an operation. They're taking out your balls, your fantasy goes, and you've got to try and get that back somehow. And I'm glad I didn't do that, coz I got to experience having a penis and having sex and enjoying it. So, I wouldn't have gotten to do that.

Julia is concerned about having surgery because of the possible lack of sensation. When she lived overseas she spoke with several transwomen who were in their 40s; she says: 'They were telling me not to get the surgery coz they felt a bit dead downstairs'. Both Sarah and Patricia had their SRS in Thailand. Patricia says: 'The journey took me up to I was 60 years old to have the surgery', and she goes on to say:

There is only one surgeon here in Australia and he's in [a southern capital city]. And he's fully booked out. If you want to get it done in [a southern capital city] rather than overseas you have to have lived as a woman for two years. And be on hormones for as long as that as well.

After discussing it with her wife, they went to Thailand:

I have contacts over there, called [doctor]. Lovely, lovely man. Treated you as a person not as a number. Everything he did was for you not for him. Such a lovely man. I had two surgeries [in 2013–2014]. My wife got me a carer, I had two carers; one for three days at 1000 baht a day. Which is about \$47 I think. And they were with you 24/7. They came,

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they looked after me, took me to the airport and see me go through the security.

Similarly, Sarah says:

The doctors in [a southern capital city] are terrible compared to Thailand. [Another southern capital city] shocking. Absolutely shocking. Depends what mood they're in, you can get a different outcome.

She goes on to say:

Thank God for Thailand! They're doing it all in one surgery now. [. . .] It's amazing. That's part of the reason I had it done. I had some of my girlfriends tell me about it.

While Erik, Felix, Hamilton, and Justin (transman, 33) had had chest surgery, none had undergone genital surgery. Justin speaks of phalloplasty, saying it is not available in Australia: 'All the specialists for this are overseas. It would be very expensive and, also, the surgery is very invasive with inconsistent results'. This is a widely held view in the literature (Califa, 2003; Cromwell, 1999; Devor, 1997; Jones et al., 2015). Devor (1997) notes that for many transmen this doesn't impact on their sense of gendered self, that is, they 'believed that they were men and that they were males, with or without that particular piece of flesh' (pp. 405–406). Similarly, in the Australian *Female-to-Male (FtM)* study (Jones et al., 2015) only 6 per cent of the 273 participants had had genital surgery (p. 46), and the authors state:

Most participants expressed a level of comfort with, or at least acceptance of, their original genitalia (or front hole/boy hole as it was sometimes termed), explaining that top surgery and other forms of masculinisation were more important to them.

(p. 47)

This point raises the important issue that for many transgender people SRS is not an option. It is not necessarily because the surgical skills are not good enough; for some, like Oliver, it isn't something they see as a possibility and for others it is for financial reasons. Mary (transwoman, 20) says: 'I do not have the funds. Hypothetically, if someone donated enough money for me to get SRS, I would go for it in the blink of an eye'. In Australia, SRS is not government funded and there are long waiting times to see the few available specialists. There are also other reasons why people do not access or have difficulties accessing HRT and SRS, such as the medical profession's

gatekeeper role and, more specifically for trans people in the NT, lack of access to reliable health care. These are issues which will be raised in the next section of the chapter.

As already noted, the final stage in Lewins' model is 'invisibility'. Some people do not reach this stage because they are not only 'out' transgender people, but they have 'other' identities. There is no one way of being transgender and increasingly the phrase 'sex/gender diverse' has been added to 'transgender' as a way of expanding the lexicon and thereby our understanding of sex/gender. Since the mid-2000s, research has revealed that transgender and sex/gender diverse Australians have increasingly adopted 'other' terms to identify their transgender and sex/gender status (Hyde et al., 2014; Leonard et al., 2012; Smith et al., 2014). Those who live in the Territory also display a range of identities, lived experiences, behaviours, and desires. In addition to identifying as men and women, participants also identified as transwomen, transmen, transfabulous, genderqueer, crossdresser, sistergirl, brotherboy, and intersex. Moreover, several discussed sex/gender as a non-binary idea. Andria (transwoman, 38), for example, speaks of sex/gender fluidity as a reason for not needing HRT or SRS, she says:

I believe that there are more than two genders, I am another gender other than male or female. I lie in-between the two. I am happy with my body I am more concerned about the side-effect of hormones and the pain of surgery. I don't need to artificially change my body as a transwoman I believe that it is a spiritual and cultural identity.

Starlady (transfabulous, 38) is 'into the idea of other genders, and so I'm not male or female but trans, but I'm a trans-lady'; she specifies that she is transfabulous! The fluidity of gender is further illustrated by Hamilton (FtM, 37) who uses the terms 'female-to-male transgender' and 'FtM', yet she goes on to say: 'I don't identify as a man and prefer to be called she'. Belinda describes herself as 70 per cent female and 30 per cent male. The term 'genderqueer' has become increasingly popular over the past decade, especially for young sex/gender diverse people. In *Private Lives 1* (Pitts et al., 2006) there is no indication of the term; however, six years later in *Private Lives 2* (Leonard et al., 2012) '27 per cent of the 116 respondents who preferred another term to describe their gender identity used genderqueer or genderqueer in addition to another term' (p. 10), 16 per cent of the participants in the *From Blues to Rainbow* study were genderqueer (Smith et al., 2014, p. 33), and it was also a common term in *Mental Health Study* (Hyde et al., 2014, p. 13). This is similar to research published in the USA (Harrison, Grant, & Herman, 2012). It was adopted by two of my participants: Bron (genderqueer, 30) and Gabriel (genderqueer, 31). Bron has considered

HRT, but does not see it as something they will do. Bron experiences anxiety when using public bathrooms, but it's 'really the only time I feel anxious'. The last time was two years ago:

I went with a friend for dinner, went out drinking. I had to use the bathroom. I remember, I was in the cubicle and I thought: 'I can't get out of here'. I've never been diagnosed with a panic attack, but I believe that is what it was. I thought I should do something about this.

It is at those times 'I thought, maybe [HRT is] a way out of my anxiety with bathrooms'. The decision not to take HRT is tied to Bron's identity as genderqueer: 'I feel uncomfortable when people call me a woman. I feel equally uncomfortable when people call me a man'; thus, 'I don't really feel like I'm transgender I don't really want to change genders'. Bron goes on to say: 'The more I thought about it, the more comfortable I was being androgynous and in-between'.

Nell's (transwoman/intersex, 52) relationship with gender is tied to her view that, on the one hand, she is intersex and, on the other hand, she is perceived, socially, as trans. She says: 'While biologically intersex I still identify as trans because that's the general attitude [. . .] I'm still looked-at as tranny or drag or whatever'. Nell was 28 years old when she was told she was intersex, that is, she has Klinefelters' Syndrome;² before that she 'thought I was trans'. Now, in her 50s, she advocates for intersex with Sisters & Brothers NT: 'Part of going into this advocacy and educating on the understanding on the differences between trans and intersex'. Belinda has never been diagnosed, but she speaks of her body in a way which implies she too may be intersex: 'I do have breasts, there is not much down stairs, I can tell you that much. I can't actually penetrate anybody'. Elsewhere she says she has 'testicles, but I don't really have a penis as such'. She was raised a boy; however, 'there is not much of me that is quite masculine. I am naturally feminine'. At age 30, she ended her relationship with her boyfriend and tried to live as a straight man; as noted earlier, she tried to 'please everybody'. Part of this was taking prescribed testosterone which resulted in 'me developing diabetes, high blood pressure, and cholesterol issues and I've put on a lot of weight'. Not unlike the discussion above regarding the term 'crossdresser', the inclusion of 'intersex' under the umbrella term transgender is problematic and it has not gone uncontested (Koyama, 2002). While it is argued that transgender is not the same as intersex (Meyerowitz, 2002; Spurgas, 2009) some intersex individuals do undergo transition because, not unlike transgender people, they do not identify as the sex/gender they were assigned at birth (Kerry, 2008; Preves, 2003). Although Nell thought she was trans until she was 28 and is perceived as trans socially, she is 'as

female as I could remember, it didn't matter what anyone externally presumed, I just always knew and felt female'. Debates regarding who is and who isn't 'really transgender' has been a somewhat unspoken, yet constant part of the transgender community. Sarah speaks of a hierarchy of 'levels' in 'the scene' depending on where someone was on their path to transition:

When I started, in my day, you had to . . . there were levels, especially out in the gay scene, there was crossdressing, doing drag, and if you did hormones you went up to another level. If you were going into counseling to have sex change then you were up on another level and if you had had a sex change then you were the ultimate. You got such respect, up there, there was a ladder you got to climb.

However, now that she has 'worked really hard to get to those levels', she says, in the drag scene, SRS is no longer 'the ultimate'. However, she also appears to retain some animosity towards people who are more inclined to be sex/gender diverse than transgender, including sistergirls (which I will come back to in Chapter 5). This is not an uncommon view in the transgender community, and, despite claims that it is an umbrella term, Wilchins (2004) has observed:

With legitimacy came a strengthening sense of identity. [. . .] I began hearing stories of people being told they weren't 'really' transgender because they didn't want to take hormones or have surgery.

(p. 29)

Wilchins (2004) goes on to say the transgender movement 'is in danger of being increasingly fractured by internal discriminations' (p. 30). These tensions are not new to queer communities; in the 1990s the emergence of 'queer' as an identity, and its critique of gay and lesbian identities, provoked a great deal of resistance and border policing. In *Must Identity Movements Self-Destruct?*, Gamson (1995) argues that the challenge by this discussion 'is not to determine which position is accurate, but to cope with the fact that both logics make sense' (p. 391). This is a position I prefer also. It is possible to support two (seemingly opposing) points of view simultaneously. The reification of 'transgender' as a position remains an essential discursive tool within the context of campaigning for further socio-political changes; most notable are those which are necessary for access to HRT and SRS. Financial hurdles to access to medical treatment mean that, at least for the medical establishment who deals in absolutes, terms such as 'transgender' and 'gender dysphoria' can lead to real-life improvements for many people. This should not mean that 'other' terms cannot be used, especially for those

who do not desire HRT or SRS. Wilchins (2004) argues that it is young people who are more likely to embrace the fluidity intended by the term transgender, stating ‘they call anything *trans* that strikes them as genderqueer’ (p. 30). Thus, it is possible to argue that being transgender in the Territory is not all too different from being transgender elsewhere in Australia or the world. Some are identifying as men and women, and therefore not finding the need to discuss their transgender history, while others have no desire to undergo hormone replacement therapy and/or surgery; they are using a range of sex/gender diverse terms, such as genderqueer. In the next section, however, we will start to see a separation of issues facing trans Territorians compared to other parts of Australia when it comes to health issues; features of the Territory, namely geographical distances and sparse population, have an impact.

Health issues

The medical profession

While transgender persons require medical assistance to access HRT or SRS, they also require general health care. Trans Territorians often meet medical staff who have little or no knowledge of what transgender is and how to support trans clients. Patricia has experienced ‘a couple of incidences where I went to the hospital and people didn’t know what to do’. Mary and Justin are both of the view that the biggest issue for trans people is access to health care. Justin says: ‘Access to specialist staff that specialise and have lots of experience in trans-related issues’. Similarly, Kelvin (transman, 28) says what is needed is ‘finding gender-friendly medical help’. Starlady and others, who started up Sisters & Brothers NT, have been actively campaigning for the health needs of trans people in the Territory. She says:

Well, they’ve got to start offering everything because there are no services pretty much that look after trans or gender diverse people in the Territory at all. [. . .] There’s nothing, there’s absolutely nothing and that’s the biggest problem I see. I mean every time you walk into any service they don’t have a service for you and their service is exclusionary because they don’t actually know anything about gender diversity whatsoever, so they don’t have training, even organisations that should have training don’t, or haven’t been to it, so I think that the really big issue, I mean we’ve started doing stuff in Alice Springs to start training some of our services, but there’s just this lack.

Nell, who is also involved with Sisters & Brothers NT, says there aren’t ‘any proper services for trans people at all. There isn’t an endocrinologist,

a psychologist and a counsellor and medical practitioner that knows anything about trans people, especially intersex'. Belinda laments the lack of support: 'I probably would've done things a lot differently if I had a lot of support in my 20s'. Throughout her interview, Belinda said 'there should be a lot more done about' services in Alice Springs, but she also emphasised this was 'not just for myself, but for other people as well who are experiencing these issues'. One of the reasons Kelvin hasn't started HRT or SRS is because of the 'lack of resources in Darwin'. Similarly, this is also experienced by ATSI people; Catherine notes there are 'hardly any doctors [who] deal with Sistergirls issues'. This will be explored more thoroughly in the following chapters.

Two things tend to happen when transgender people go to see a doctor; first, they may be forced to go elsewhere. Mary says:

I was unable to find any help from the medical practitioners in the NT, as most of them had not even heard of the transgendered let alone knew how to treat them, so I was left with no choice but to seek medical help in other states.

Or they encounter doctors who don't know about transgender issues. Belinda observes:

If you want to see a doctor over medical issues, that's fine. But, you start talking about anything along these lines, as far as your gender is concerned, or anything to do with transgender-wise, or anything to do with along these lines, they know nothing what you're talking about or the next stage to go to. It's a serious issue.

As a result, several felt that they must spend time educating doctors first. As Starlady says:

As a transperson, you have to go in, you have to go advocate for yourself every time and you have to educate, and as a client, that's not right. They have an ethical obligation to be informed because if you are not informed, they can't actually give you equitable access to that service.

Nell agrees, and while she says the 'doctors are sympathetic of my circumstance and situation, it's me still educating my doctors'. Several spoke of their doctor's willingness to learn. Hamilton says: 'There are some supportive medical staff who are keen to learn if they don't know'. Amelia said: 'Once she got what I was saying, she was like, ok, I'm going to help you do this'. It has also been the experience of some trans Territorians that when they have discussed being transgender with medical professionals,

they have had negative reactions. Patricia describes an incident in the local hospital:

They sort of looked at me . . . they just didn't know what to do. I had breasts and I still had the penis at that particular time. They just didn't know how to sort of approach me. They just didn't know what to do.

Mary describes psychological services as being unhelpful and says they 'often deny that you are transgender or worse, attempt conversion therapy'. Hamilton has observed that 'some doctors have also been transphobic' or ask inappropriate questions: 'I saw a doctor about a tooth ache and was asked whether I had had phalloplasty surgery. The relevance escaped me'. As previously mentioned, Leah had two previous attempts to begin her transition. One of the reasons she delayed the process five years ago was because of the reaction she received from a doctor:

I spilled my guts out with him. He said: 'Why would you want a big hairy guy on you?' I thought: 'You fucking got to be kidding me!' I knew I had to get a doctor's referral to get further. It just pissed me off, these people know nothing about where I am coming from and to throw that at me . . . and then I backed off again with a lot of crying.

Part of the problem is that the hospitals in the NT are mostly student hospitals. According to Patricia, it's 'where people come to learn'. During the incident mentioned above, Patricia goes on to say that 'they had to get the main doctor who they were training under and get him to come and see me and explain to him what was happening'. Sarah agrees, saying that Darwin is 'a training city for doctors. It's continuously rolling over and new ones coming in all the time'. Thus, especially when it comes to counsellors and psychiatrists she says: 'You put all your emotions into a counsellor, and within 3–6 months they're putting their resignation in and going onto the next level'. As a result, according to Sarah: 'You've got to go through the whole life story again. And for someone who is going through that, it's just horrific. Always going back, restarting'. Belinda views the hospital in Alice Springs in a similar way: 'That is something else here in Alice Springs, they made this hospital here a training hospital, and it really shouldn't be [. . .] it shouldn't be a continuous training facility'. Brianna (sistergirl, 32) says while organisations such as Sisters & Brothers NT receive a lot of positive feedback from medical services who agree to training and implement changes etcetera, they 'don't follow through. It can be a bit disheartening'. She goes on to say that doctors 'leave or they say they are going to do something and then they don't end up doing it'. Starlady notes that 'it takes a year or two to get experience

and that's as long as they last and then they have to go'. Brianna stresses that it would be good if health professionals 'are here long-term and get some training in diagnosing a transgender person'; if this was the case then sister-girls and brotherboys wouldn't have to travel 'thousands of kilometres down south to get it. A lot of them don't want to leave their community'.

For several decades, one of the positions of the transgender movement has been to question the medicalisation of transgender. Califa (2003) writes 'rather than being grateful for any help they are given, transsexuals today are questioning the authority of the medical and mental-health professionals who function as gatekeepers for sex reassignment' (p. 224). And the perception remains in Australia. For example, in a study by Riggs, Coleman, and Due (2014), they observed that participants' negative experiences with psychiatrists was in part due to the gatekeeper role (p. 232). When asked about how she felt about the process of obtaining a letter of support from a psychiatrist, Amelia said:

The psychiatrist is like a gatekeeper. You take one look at me and I'm pretty sure you're not a boy. Why do we need that psychiatric report? I understand we need to go to the GP and getting a referral to an endocrinologist, that's understandable as you need someone who specialises in that field. To be diagnosed with gender identity disorder . . . I don't really see that as a necessary step.

Part of the problem with the medical profession's role as gatekeepers is their outdated views of gender roles. Nell experienced the views of the medical profession in the 1980s, when she 'had to do my two years of psychiatry to be approved for the sex change'. She was expected to visit the doctor monthly and observed that 'their attitude then was normalising, to make you as normal as a normal female as possible, fit in the binary'. Meyerowitz (2002) states that 'they hoped their patients would look and behave like conventional men and women'; moreover, 'the doctors also expected their patients to live as heterosexuals and, better yet, to marry after surgery' (p. 225).

Mental illness

Over the past few decades, research has consistently found that trans Australians experience high levels of mental illness. For example, the *Private Lives 1* (Pitts et al., 2006) report the rates of anxiety and depression for transgender women (37.9 per cent and 48.5 per cent) and transgender men (38.2 per cent and 58.8 per cent) are greater than the rates among lesbian and bisexual ciswomen (23.6 per cent and 37.9 per cent) and gay and bisexual cismen (17.6 per cent and 29.5 per cent). These results were replicated in *Private Lives 2* (Leonard et al., 2012) and *Mental Health Study* (Hyde et al., 2014).

A high rate of suicidal ideation was present in *TranZnation* (Couch et al., 2007) and, of those who took part in the *Female-to-Male (FtM)* (Jones et al., 2015) study, 81 per cent have ‘experienced suicidal ideation and in 68% of the cases these thoughts were linked to their personal issues in regards to their trans* identity’ (p. 72). *Private Lives 2* (Leonard et al., 2012) implemented the Kessler Psychological Distress Scale (K10). Transwomen scored 23.2 on the K10 test, transmen scored 23.2, and ‘others’ scored 22.1, which indicates that respondents are likely to have a mild mental disorder.

While almost all my participants were physically healthy, some were experiencing mental health issues. In both the online survey and the face-to-face interviews, I invited participants to complete the K10 test. Of the 20 people who completed the K10, 12 were ranked as ‘likely to be well’ and the remainder were either likely to have a ‘mild mental disorder’ (2) or likely to have a ‘moderate mental disorder’ (5); one was ranked as having a ‘severe mental disorder’. This latter person is Nicole, while she describes herself as ‘a lot happier inside’ after she started to recently live full-time, her mental health has been severely impacted by threats against her life which led to a suicide attempt (which I will return to later). Aside from this incident, she says: ‘I’ve always had depression and social anxiety and it’s nothing to do with . . . it’s probably to do with trans, coz I was never happy’. When Nicole first approached me to be interviewed in 2016, she was not living full-time and the social anxiety made it very difficult for her to communicate with me and she was not able to be interviewed at that time. For Nicole, transitioning ‘is the best thing I have ever done’. She reiterates that before her life was threatened she ‘had never been happier’. Now she is recovering that happiness: ‘Just slowly, getting back up there. It’s going to take time’. Erik, who self-describes his mental health as ‘fair’, is likely to be experiencing a ‘moderate mental disorder’ and says:

I have suffered from anxiety and depression for a long time, part due to the stress of being a transsexual growing up in a conservative background, part due to my family being of stolen generation, and part due to car accident [post-traumatic stress disorder]. I am managing it all with counselling and medication, and self-determination.

For Bron, anxiety and panic attacks are localised around using public bathrooms:

That’s really the only time I feel anxious. I’ve had panic attacks too and that’s not normal. If you’ve got to go to the toilet you should be able to just go. You shouldn’t have to worry so much.

Gabriel who is 'likely to be well' says they:

Deal with a lot of stress at home and at work, which impacts on my emotional and mental health. I have been diagnosed as depressed in the past and suffer from undiagnosed anxiety.

Mary and Brendan also say they experience depression. However, Mary is adamant now she has started to transition 'things are progressively improving'. It is unsurprising that beginning the transition process would make Mary feel things are getting better because, as Lewins' (1995) model notes, the first stage is defined by anxiety. For Amelia, her anxiety was further illustrated by suicide attempts, beginning at eight years of age:

Yeah. I was not happy. I couldn't keep living like that. I felt that I couldn't. It was getting really difficult and it was getting hard to pretend. It was either pretend and be safe, or don't pretend and potentially be killed anyway. So I thought, what was the point?

Amelia has attempted suicide five times:

I'm so glad that none of them worked. They almost worked. Two of the five almost worked. I'm surprised that I am still alive coz some of the ways I attempted to commit suicide were pretty . . . definite.

Prior to taking hormones, Amelia was very suicidal:

I was without hope and I was going to commit suicide, I attempted suicide and it did not work. Because someone pulled me off the edge of that, which I'm glad of that, I'm glad that happened coz now I'm actually getting stuff done.

Belinda had suicidal thoughts as a teenager, emphasising that they were:

[j]ust thoughts. I guess a lot of them, hopelessness. I think confusion more than anything else. Just feeling lost. I think that was the problem. Lost. I think that at the time, you're not really mature, coz there is no one to turn to provide me with the proper answers.

She recently came out as transgender and among her reasons for this: 'I thought I might end up killing myself. That's why I started doing it'. Nicole, who also only recently came out as transgender, had had three suicide attempts, the latter of which occurred a few weeks before I interviewed

her; indeed, she had only been out of hospital a little over a week. The first attempt was when she was 13 years old and she says: ‘I don’t think I actually want to end it, I just want to end the pain’. The last suicide attempt had occurred not long after she started living full-time and came out publicly. While she was supported by her ex-partner, family, and friends, she says: ‘A few people turned up [at my house] and threatened to kill me’. The incident occurred not long after she came out publicly and in addition to be threatened, Nicole also noticed that some people called her ‘it’. While not family, but ‘friends, people I was good friends with’. She goes on to say:

It is the one thing that really does upset me. I don’t mind being misgendered, called ‘him’ . . . I love being called her, and miss and ma’am and all that, but when people call me an ‘it’, it really hurts.

Her suicide attempt failed when a friend saved her life. However, she couldn’t stay in Alice Springs and moved to Darwin.

The authors of the *Mental Health Study* (Hyde et al., 2014) ‘did not ask participants directly about suicide, or whether they had previously attempted suicide’ (p. 22); however they ‘strongly suggest that trans people living in Australia are a high-risk group for suicide’ (p. 22). Among the young transgender and sex/gender diverse people who participated in the *From Blues to Rainbow* (Smith et al., 2014) study, ‘38% had had thoughts about suicide’ (p. 12). Several people spoke of suicide in the transgender community. Nell said, in the early years, poor surgical outcomes left many people unhappy and suicidal:

In those days, people who had the gender reassignment [would commit] suicide in ten years. I was [in southern capital city] for about five years, and I saw lots of suicides and I met lots of trans, lots of older trans people, in their forties and fifties and sixties that had the biggest botch jobs, just holes drilled into them and still running around again, looking like men. Told they were women, and all this bizarre psychology and fucking psychology by professionals.

Patricia believes that some people, who are impatient to have surgery, are likely to commit suicide:

Even before they can have the surgery, they are waiting, waiting, waiting and they cannot wait anymore and they do away with themselves. Because they can’t do it in a certain amount of time and they can’t wait that amount of time.

Suicide and mental illness are also impacting ATSI communities. According to Starlady, ‘for the sistergirls there is a major need for mental health services and support’. These are issues to which I will return in Chapters 4 and 5.

Alcohol, drugs, and sex work

While not a central issue raised by trans Territorians, it is important to discuss alcohol and drugs. Often, when transgender people are in the ‘purge and delay’ stage, as suggested by Lewins (1995) earlier, ‘heavy drinking and/or drug taking’ (p. 78) are a means of denying their gender. As already noted, when Patricia was in a period of ‘delay’ she ‘did a lot of drinking and tried to hide it that way’. However, alcohol and drugs are also part of transgender people’s lives more generally. Participants of the *Mental Health Study* (Hyde et al., 2014) ‘were approximately twice as likely to have used an illicit drug than the general population in the last 12 months’ (p. 62). Sarah states that ‘most trannies I know smoke dope’ and, similarly, Hamilton claims that ‘the sheer amount of alcohol consumed in the LGBTI and other communities is problematic and not very supportive of those of us who value being clean and sober’. Sarah says that heroin has been part of her life, on and off, for most of her life. In 2000, she lived in a southern capital city and she ‘fell off the wagon’. She says it was

[t]he worse thing I ever did. It just sucked me up. It’s just vile. Money, money, money and drugs, drug, drugs. Just right on your doorstep, just everywhere. I had gotten off heroin and everything and I was on methadone and I got a transfer to Sydney. And when I got to Sydney they fucked up my transfer and I had nothing, so I went straight back into it. And I lived in an apartment that looked down onto [street]. I was straight into it. I had a boyfriend who was just using me. It was just terrible. Terrible, terrible time.

Coupled with taking drugs is sex work. Sarah started sex work when she ran away from home at age 15. In the 1980s and 1990s, sex work appeared to be one of a limited number of employment options for transgender people. In Perkins et al.’s (1994) *Transgender Lifestyles*, almost half (45 per cent, n = 66) of the participants ‘reported having spent some time engaged in sex work’ (p. 34). On the one hand, the authors state that the high number of sex workers in this sample can be attributed to the recruitment of participants through ‘brothels, tranny [sic] sex workers’ street locations, and

sex workers' organisations [. . .] sexual health clinics and needle exchange services' (p. 18). On the other hand, despite this potential bias, the authors conclude that reliance on sex work is 'a fact of life and one that is unlikely to change without a concerted effort to re-integrate transgenders into mainstream society' (p. 42). While subsequent research projects reported fewer rates of sex work, a high rate of drug use is reported in four projects: *Transgender Lifestyles* (Perkins et al., 1994), *Health Needs* (Bliss & Porter, 1996), *Private Lives 1* (Pitts et al., 2006), and *Mental Health Study* (Hyde et al., 2014). For Sarah, the relationship between drugs and sex work became a 'vicious circle' because 'as soon as I finished that job I'd want to get out of it. I'd want to block it out'. Part of the difficulty is associated with being pre-operative during those years:

Coz you're a transsexual, they're with you coz you've got a dick. So, it was that horrible. You were dealing so much shit, but you still had to make money. And they were still wanting to suck your dick. You had to just block it out and be just what they wanted you to be.

Because she hated her penis, 'I'd always have to look away. If they went down on my . . .'. Thus, drugs were not only a way of coping with sex work, but also having a body she hated: 'I hated what I had, there'. She took Ice at one stage; however, the relief was only temporary: 'As soon as you stopped the Ice, you'd be back again [snaps fingers] to that hatred'. Nell also associated drugs and sex work: 'I've worked in [three southern capital cities], I've been a sex worker most of my life, part of the repertoire growing up – sex work and drug addicts'. Nell originally saw sex work as a part of a social thing, make some money before going out to party, 'it wasn't a big deal to go, you know, grab a few bucks for a blow job and go out partying'. She started sex work again when she moved to the NT: 'I was needing to cash up a bit'. She elaborates on this decision by stating she is

[u]sed to having money and being comfortable financially. So, I just went: 'Oh, I'll go back to work here and see how that goes'. Only to my surprise to find that I'm quite a novelty being the only trans, intersex, male-female worker here and so I put an ad[vert] in the local paper and worked back-to-back, for days and nights on end.

Her sex work included clients who were 'really straight-orientated closeted men that are so hung up and suppressed in their personality and their sexuality'. While she could 'monopolise the workplace', it took its toll: 'psychologically it became really draining [. . .] because a lot of my work would be counselling. I went: Oh, my god! This is just getting too much'.

Life in the NT

There are some negative views and experiences for trans people in the NT. Several people comment on how the NT is ‘too small’ and this impacts on their lives as trans Territorians. For example, Sarah says ‘it’s not an easy place to be transgender in, coz it’s so small’. Some have also experienced violence in the NT. Nicole had to leave Alice Springs and move to Darwin because her life was threatened and, as will be explored in the next chapters, sistergirls and brotherboys in the NT experience violence in traditional communities. Belinda thinks ‘people are so ignorant here [in Alice Springs] as well’ and similarly Nell believes she has ‘never lived in such a suppressed state in my whole life as I have in the NT’. But, on other hand, while Belinda thinks ‘it’s not 100% gone. It’s much better than it was ten years ago’ and Nell likes Alice Springs because ‘it’s an amazing community and very queer orientated’. For Nicole, it will always be home and for Julia, the fact that Alice Springs ‘is like a small community and like a big family’ is why she prefers it to Darwin. Leah and her family had moved to Darwin nine years ago: ‘It was business opportunity and lifestyle, infrastructure and lifestyle. For the amount of people here . . . we have everything. It was great for the kids’. Although Amelia grew up in a remote area of the NT she now lives in Darwin, which she likes: ‘Apart from the heat’. Where she grew up

[w]asn’t very support of any LGBT whatever. It wasn’t a great place to be if you aren’t straight. I found that Darwin has been surprisingly supportive. I just associate the NT . . . everyone is just really supportive. I haven’t had any problems with anyone except my family.

Sarah also thinks ‘it’s very accepting’ but the acceptance is conditional. She goes on to say that being transgender in the NT requires respecting the culture:

There was one incident when there was a trans [at a local pub], but she was terrible. Speaking in a really deep voice. Somebody would be looking at her and [she’d say]: ‘What the fuck you looking at? You got a problem?’ There is no need for that. So, it’s just the point of, if you’re putting yourself in situations, you need to blend in, you need to be acceptance of everyone else.

Patricia speaks of a similar incident in Alice Springs:

There is one girl, who now lives in [southern capital city], she just went around Alice Springs saying she was transgender, saying treat me like

this treat me like that, and she almost got run out of town, she was in the face of everybody. [. . .] Don't push yourself onto someone saying I'm trans.

According to Sarah, 'if you're to go into a pub, an ocker pub, then blend in. Accept the area you're in'. Patricia agrees: 'A lot of people do that, get into everyone's face. You can't do that otherwise you'll lose everything, lose everybody'.

Despite a fondness for the NT, almost all spoke of leaving the Territory. Indeed, four people had left and several have left since speaking with me. They weren't leaving because they wanted to, but because of push factors. As Julia says: 'I actually like living here and I don't want to leave'. Most reasons for leaving involved lack of services and support for trans people. Leah says that 'being up here in Hicksville doesn't help'. She remains unsure whether she will leave: 'I don't know if I can stay here with what I'm going through at this point in my life', and she goes on to say:

Going back to the help I need, it's not really here. I really don't want to go down to [southern capital city]. Not yet anyway. We've got so many things, so much at stake.

Patricia is of the view that 'once you get to that point you've got to leave and go down south', people do. She speaks of others with whom she is acquainted with: 'a lot of girls I know have left Alice to go to [southern capital city]. Where they get better support there'. There is one person who:

[j]ust decided to go back to [southern capital city], and she cannot bear it, she has no support up here, the only support she had was herself. She was scared to go out. She used to come around our place, sit here for hours and talk to me. She didn't want to be here to go through her transition. And she has no sense of support up here for transition.

Patricia is of the view that some 'leave Alice Springs to go to Darwin. I think there is some support in Darwin now'. However, those in Darwin, such as Julia, think otherwise. She states, 'I feel like there's not enough resources here. And I'd be better off going to [southern capital city] for that'. If she did leave, 'I could have more than one doctor to choose from'. I had interviewed several of these participants several years apart, thus while Julia struggled to find resources, Nicole did not.

She had recently moved from Alice Springs where, she says, there are no resources: 'In Alice, there is nothing. I had to do everything myself'. Yet she speaks of the mental health service Headspace in Darwin which hosts Prism, a group for LGBTQI youth. Belinda is adamant she won't leave Alice Springs:

I am born and bred here, and my attitude is I'm not leaving because it's not available. My attitude is: No that is wrong. I shouldn't have to leave. What can we do to make it happen? That is my attitude. We stand and stay at it until it does actually does happen. I think if we do that, I really do think we can make this happen. It's called grass-roots.

Several participants are involved with Sisters & Brothers NT and they speak of the structural issues, namely support from the Territory government and/or difficulties in organisations. Nell observes that 'our government³ is taking away more services that we've actually got to begin with'. This impacted on Nicole; she wanted to make it clear that government funding of services is essential because funding cuts meant her doctor left Alice Springs:

I had a really amazing doctor in Alice [Springs], she was the one I was able to come out to and get everything happening. The government cut funding to [service] so she had to go somewhere else and that was really hard.

As noted above, there is a high turn-over of medical staff because people come to the NT for training and then leave. However, Starlady states that services' personnel also leave because of the 'condition they're working under'. Starlady says:

Organisation[s] needs to start looking after their staff better and making things more attractive so that the staff stay, because that's healthy. Every single organisation I've worked for has been like that, every single one.

She goes on to say that organisations in the NT use

[t]heir workers and spit them out. They create these spaces that are unsustainable for their staff on the ground and they sort of have an attitude of like, okay, we've got you for about two years, how can we get as much out of you as we can before you leave. That's one of the really big things that's causing massive problems out bush.

Belinda also has a lot of empathy for GPs in Alice Springs and their workload:

You've got to remember these people are extremely busy and see so many patients, and I don't blame them, generally. The problem with your general medical staff here, they are made to see so many different people in one day, that is way too much for them. Really it is. If you look at even your general clinic, a lot of their staff have got to see so many people and then a lot of them have to go to see people at the prison and then they have got to do time at the hospital and see all their regulars as well. We are talking about massive burn out. They have only got limited time and often when you're booked to go see your doctor quite often you don't see him at the appointment time because you've got to wait, quite often you see him anywhere between half an hour to an hour later, they are running behind on schedule. They've really got overload. You can't have a proper conversation with your doctor because they are overbooked.

The NT's population is highly transitory and the term fly-in-fly-out is often applied to people in the mining industry, but it is also applicable to many industries in the Territory. For example, as mentioned earlier, medical professionals come to the NT for training and/or leave after a few months or years. For the people who live in the NT and call it home, the high turn-over can have an impact on how they interact with new arrivals. Oliver says:

I must admit it does piss me off when you get a friend and the friend moves away. [. . .] That does piss me off about Darwin, but you know it's part of it.

Sarah is of the view that when it comes to the issue of being transgender 'you want to put your emotions into one person, because it's daunting for them to transition'. As has been seen in several people's stories, Sarah goes on to say this is especially true for people, usually later in life, 'who have left their wives and their families. Now is a time they can look after themselves and transition [. . .] to do that here is really hard'.

Conclusion

It is possible to argue that being transgender in the Territory is not all too different to being transgender elsewhere in Australia or the world. Some are identifying as men and women, and therefore not finding the need to discuss their transgender history, while others have no desire to undergo

hormone replacement therapy and/or surgery; they are using a range of sex/gender diverse terms, such as genderqueer. Not unlike transgender and sex/gender diverse people throughout Australia, those in the Territory encounter ignorance and transphobia; however, what makes these issues problematic is the fact that access to health services is difficult, especially in remote areas. Thus, people are being forced to make a choice: either stay and sacrifice their desire to live in their affirmed gender or leave the NT, their home. The pressure to make this choice is more difficult for trans ATSI people, for whom family and country are integral parts of their identities. The next two chapters discuss the experiences of sistergirls and brother-boys, several of which are not dissimilar to those of other trans Australians, and other issues are unique to this population because they are navigating being transgender and being Aboriginal.

Notes

- 1 When a person refers to 'out bush' they mean remote areas of Australia, usually far away from residential centres.
- 2 A person who has Klinefelters' Syndrome is considered to possess an 'extra' sex chromosome and their chromosome configuration is designated 47XXY.
- 3 Since her interview, the political party which made up the government she speaks of has been voted out of office.

4 Sistergirls and brotherboys

To the sistergirls and brotherboys who struggle with their sexual identity, I say to you: Stay strong. I stand here with you.

These words were delivered by Senator Malarndirri McCarthy, in her maiden speech in 2016. Senator McCarthy is the second Indigenous woman, following former Olympian athlete Nova Peris, elected to the Australian federal senate. By speaking these words, sistergirls and brotherboys are mentioned in Australia's federal parliament for the first time.¹ Transgender Aboriginal and Torres Strait Islander (ATSI) people are in crisis; they struggle with the double discrimination of racism in predominantly white transgender communities and transphobia in traditional communities. Senator McCarthy's plea to 'stay strong' resonates because all too often sistergirls and brotherboys suffer, not only from verbal harassment and ostracism, but also violence and sexual abuse. Also, many sistergirls and brotherboys turn to suicide. Over the years it took me to research and write this book, quite a few sistergirls killed themselves. Even those with a social support network around them see this as their only way out. Suicide is a prominent issue for Australia's sex/gender diverse First Peoples and has inspired several individuals and their non-Indigenous allies to advocate for better understanding in Indigenous cultures and improved services. The sistergirls and brotherboys you will meet in this chapter and the next will give voice to the myriad issues pertinent to their lives and, as such, will contribute to a broader conversation of transgender in Australia and across the world.

The issues facing sistergirls and brotherboys exist in conjunction with broader issues affecting all ATSI people. All too often, the problems they face as ATSI transgender and sex/gender diverse people are compounded by discrimination, inequality, and violence as ATSI people. By every socio-economic measure, whether it be health, education, or employment, Indigenous Australians are doing worse than other Australians. For example,

according to the 2011 National Census, 2.5 per cent of Australia's population identify as ATSI, yet in 2016, they made up 28 per cent of Australia's prison population. In the Northern Territory (NT), 26.8 per cent of the population identify as ATSI in the 2011 Census, yet in 2016 they made up 84 per cent of the prison population. Moreover, despite a Royal Commission into Aboriginal deaths-in-custody between 1987 and 1991, the rate of deaths has increased by 150 per cent. The brutal treatment of children, including Indigenous children, in custody at the NT's Don Dale facility sparked public outcry following the airing of a documentary by the Australian Broadcasting Corporation's *Four Corners* (Meldrum-Hanna, Fallon, & Worthington, 2016). The depiction of children strapped to chairs and covered by spit-hoods evoked comparisons with Abu Ghraib (Davidson, Karp, & Hunt, 2016). The incarceration of transgender ATSI people has been a prominent issue for the NT's advocacy group, Sisters & Brothers NT, which campaigned heavily in 2015 around the issue of misgendering sistergirls in prison. In 2016, the Department of Corrections established a working group to develop a policy for transgender and intersex prisoners in the NT.²

Systematic racism is not a recent phenomenon. Since colonisation in 1788, successive colonial and federal governments have implemented policies which have treated ATSI people, and their culture, as inferior. From Terra Nullius through the Stolen Generations and to the Northern Territory Intervention in 2007, government attitudes towards and responses to Indigenous Australians have led to genocide, forced relocation, decimation of culture, loss of community and identity, and generational trauma. Over the past few decades there have been concerted efforts by Australian governments to 'close the gap' between Indigenous and non-Indigenous Australians and right the many wrongs previous governments have done. In 1962, ATSI people were given the vote and the success of the 1967 referendum meant that ATSI people could be counted in the national census. The Mabo decision of 1992 overturned Terra Nullius and, in 2008, Prime Minister Kevin Rudd said 'sorry' to the Stolen Generations. These historical oppressions and contemporary inequalities are the back-drop to the lives of sistergirls and brotherboys. The ATSI transgender people you will meet in this chapter and the next speak equally of colonisation, systemic discrimination, and generational trauma as they do about being sex/gender diverse. These are matters which are inseparable from each other and core to their sense of self as sistergirls and brotherboys.

As I have mentioned in Chapter 1, I began this research project because the Australian transgender literature says very little about sistergirls and brotherboys. This chapter addresses that dearth. Of the 26 people who participated in this project, four are Indigenous: Brianna (sistergirl, 32), Catherine (sistergirl, 30), Crystal (sistergirl, 45), and Erik (brotherboy, 38).

And while Australia's sex/gender diverse First Peoples have rarely been included in academic and government-funded research, they have drawn the attention of reporters, documentary makers, radio hosts, and television presenters. Thus, to complement the interviews I also conducted an analysis of the first-person narratives in an anthology (Clancy, 2015) as well as news articles (Burin, 2016; Clarke, 2015; Riley, 2013; Sleath, 2014), documentaries (ACON, 2010; McCrum & Canny, 2009), television programmes (Brockie, 2013; Clarke, 2013; Murphy-Oates, 2015; O'Saurus, 2014; Whyte, 2016), and YouTube videos (Downes, 2016; Gloria, 2014). Therefore, an additional 19 people (12 sistergirls and 7 brotherboys) have been included. It is their stories you will hear in Chapters 4 and 5.

All that is known about the etymology and socio-cultural meanings of the terms 'sistergirl' and 'brotherboy' is garnered from contemporary individuals and their recollections of previous generations, as well as their own lived experiences. In 200 years of colonisation very little has been written about Indigenous queers. In Hodge's (2015) edited collection, *Colouring the Rainbow*, Baylis (2015) writes, 'the sexual and gender diversity of aboriginal peoples remains mostly absent in the recordings and interpretation of Australian histories, and these absences reinforce a heterocentric reading of Aboriginal cultures' (p. 1). Subsequently, both Indigenous and non-Indigenous people continue to perceive queers as a western phenomenon and that they do not exist in traditional cultures. However, Indigenous queers do exist in traditional societies. In 1994, a group of Indigenous and non-Indigenous academics calling themselves the Gays and Lesbians Aboriginal Alliance published *Peopling the Empty Mirror* (Dunn-Holland et al., 1994), the first critical work of queer Indigenous studies. The authors emphasised that this is an 'alternative textual strategy that would be closer to the "group discourse" characteristics of Aboriginal oral cultures' (Dunn-Holland et al., 1994, p. 4). In the first part of the article, the authors speak of their experiences regarding the intersection of race and sexuality, and in the second part, the authors address the misconception of homosexuality as a 'White man's disease'. Fletcher says:

I think this business about homosexuality being a White man's disease is just not true, it's basically a lie. I think there are lots of examples in Aboriginal societies of people expressing their sexuality in a lot of different ways.

(Dunn-Holland et al., 1994, p. 10)

Wafer (Dunn-Holland et al., 1994) argues that early Australian accounts of homosexuality are not only few in number, but it is uncertain as to the reliability of the source. On the one hand, Wafer posits, there is the possibility that early Missionaries invented these 'bestly' acts to justify their

prejudice against Aboriginal Australians and, on the other hand, it is possible Indigenous people gave false accounts to white people about homosexuality because they knew that this would shock them. Another reason to explain the paucity of information could be because ‘some of the texts deal with aspects of ritual life that are regarded as secret parts of Aboriginal Australia’ (Dunn-Holland et al., 1994, p. 30). Moreover, even with the rarity of accounts, and it should be noted that there are even fewer reports of women’s (homo)sexuality, Wafer’s review of the documented occurrences of homosexuality include ‘subincision intercourse’, ‘boy-wives’, intergenerational kinship relationships, and mutual masturbation. However, there is an emphasis on sexuality rather than sex/gender diversity and when referring to ‘boy-wives’ there is no implication that either partner is not-man or not-male. Wafer acknowledges:

The question of cross-gender or mixed gender categories does not appear to be mentioned at all in the earlier literature, and this is probably because such categories were not present in Aboriginal Australia.
(Dunn-Holland et al., 1994, p. 38)

The fact that sistergirls and brotherboys do exist, and did exist in traditional cultures, suggests that Wafer’s speculation was premature.

Origins

While textual evidence may be lacking, oral traditions reveal that sistergirls have always existed in traditional cultures. In her contribution to Hodge’s (2015) anthology *Colouring the Mirror*, Brianna (Curtis, 2015), says her grandmother told her ‘that there were always sistergirls in Aboriginal communities and there always were trans people long before European settlement in Australia’ (p. 37). This view is shared by other sistergirls. For example, Kooncha (Wallaga Lake, New South Wales), in the documentary *Sistergirls* (ACON, 2010), says:

There is certain evidence that suggests that there was a history of transgenderism within Aboriginal and Torres Strait Islander society way before Europeans even came to Australia. We are no different to the rest of the world.

(cited in ACON, 2010)

Francene (regional Queensland), also in the documentary *Sistergirls* (ACON, 2010), says that when she was younger there were two sistergirls:

You never saw them in the outside community [. . .] and they were completely accepted [. . .] and the community just accepted it as such

and there was no hassles there at all, and that was the first time, and I thought this isn't bad at all, he's accepted here. The community knew who he was.

(cited in ACON, 2010)

In her interview with me, Crystal says the term 'sistergirl' came out of the Stolen Generations. In the 1920s and 1930s, communities emerged out of forced relocation and, in these communities, Indigenous women would protect 'gay, flamboyant trans people'. Crystal says that while they were stigmatised, there was a place for them. Although there wasn't a word, they were called 'funny people'. Crystal goes on to say that 'sistergirl' emerged from the interactions between these women and the 'funny people'; if a woman saw a feminine man they'd say 'hello sister'. The term has now emerged into the contemporary setting with a very specific meaning attached to it. Kooncha (Brown, 2004) says it

[i]s a self-adopted term, recognising that western definitions of transgender [. . .] do not reflect the culture and lived reality of Aboriginal and Torres Strait Islander transgendered people. The term 'sistergirl' is also used in many Indigenous communities in northern parts of Australia to refer to transgendered people and to also replace the derogatory terms that were used in the past.

(p. 25)

The terms 'sistergirl' and 'brotherboy' can also be written 'sistagirl' and 'brothaboy'. I have chosen to maintain the former spelling because, at the First National Indigenous Sistergirl Forum (Costello & Nannup, 1999) it was recommended that "'sistagirl" from now on be spelled "sistergirl"' (p. 10). Costello and Nannup (1999) elaborate that the term 'sistergirl' can have different meanings depending on location. For example, those who live in 'traditional or semi-traditional communities [. . .] claim absolute identity with and ownership of the terminology, which is inclusive of not only an individual with transgender qualities but also a sister' (p. 6). The authors go on to define 'sister' as someone who identifies as 'gay'. Yet it was also stated that 'urban sistergirls stressed "'sistergirl"' terminology for them was an individual with transgender qualities' (Costello & Nannup, 1999, p. 6). Arguably, it is this variability which has led to some to question whether or not sistergirls are 'really' transgender.

Although there has been very little information available regarding sistergirls, there is even less about brotherboys. In the documentary *Brotherboys Yarnin' Up* (Gloria, 2014), published on YouTube, when Kai Clancy (Waka Waka/Wuli Wili, Queensland) came out, he 'couldn't find anything about

brotherboys. There was nothing out there. There was only resources on sistergirls and that made me a bit worried about my transition' (cited in Gloria, 2014). Kai and other brotherboys such as Dean Ednason (Wiradjuri, New South Wales), Jeremy Anderson (Fremantle, Western Australia), and Taz (Townsville, Queensland) have increased the profile of brotherboys through public forums, documentaries, television appearances, and YouTube videos. In *Yarnin' Up* (Gloria, 2014) Kai defines brotherboy as:

[a]n Indigenous transgender or sex/gender diverse person who was assigned female at birth, but inside they have a boy's spirit and they live through that boy spirit. They take on male roles in society and community and they live their lives as male. Being a brotherboy encompasses your gender identity as well as your cultural identity.

(cited in Gloria, 2014)

While the terms 'sistergirl' and 'brotherboy' have been adopted to distinguish the specific socio-cultural roles and identities from western terms such as 'transgender', this is not to say that traditional terms do not exist in Indigenous languages. For example, sistergirls are called 'yimpininni' in the Tiwi Islands (Baylis, 2015; Clarke, 2015), 'gwarregwarre' in the Arrernte language around Alice Springs, 'kungakunga' in Luritja of the Western Desert, and 'karnta-pia' in Warlpiri, which is spoken in the areas north and west of Alice Springs (Curtis, 2015).

Social roles

Oral histories reveal that sistergirls occupy the same social role as women. In her interview with Riley (2013) for the *Star Observer*, Brianna says sistergirls have 'always been in our culture, and we have the role as a woman' (cited in Riley, 2013). Similarly, Lillian (north Queensland), in the documentary *Sistergirls* (ACON, 2010), says:

On Aboriginal communities, if you're a sistergirl, you're expected to play the role of a woman. That means, big long t-shirts, big long shorts, hair done up, they're your sistergirls. The sistergirl is expected to find herself a real man, a straight man, as the community outside would say.

(cited in ACON, 2010)

Brianna also says that sistergirls do women's activities such as 'women's dancing and ceremony and all that sort of stuff' and 'go hunting with the women. We go sitting with the women and talking with the women, and

grow up and have nieces and nephews like they're our own children' (cited in Riley, 2013). Francene also speaks of the role as child carers:

Mothers would ask you to be their babysitters, with the children caring, because they knew you cared for them. You were like a mother, you played that mother, you gave them comfort, feed them and do all the things a mother would do. And sistergirls do this today. I did it in my day. I don't think it's changed at all.

(cited in ACON, 2010)

Crystal was asked to take care of children at various times in her life. The first occasion occurred when she was 'young myself' and she was asked to look after two ten-year-old sistergirls who

[h]ad family problems. They acted too girly. They acted more like girls than men. And they were effeminate. [...] I taught them how to be ladies. It's more or less, two of my daughters learnt a lot. And now they are old enough, you see two good looking women, they've got good careers, back in their community and they are very well educated. It was a good thing, coz they went to a good school. They had a good up-bringing.

(cited in ACON, 2010)

She describes the experience as being 'like I was on cloud nine. I felt like a mother' (cited in ACON, 2010). In her contribution to Hodge's (2015) anthology, Crystal (Johnson, 2015) reflects on when her brother passed away, and he had asked her to take care of his children:

Look after my kids. You're the next caretaker for them. You fight for their rights. You fight for them, as I did for the Tiwi Islands. Your kids are my kids. You are head father now.

(p. 33)

In Clarke's (2015) *Buzzfeed* article, Laura Orsto (Tiwi Islands, Northern Territory) reflects on how sistergirls helped her when she was young:

There were plenty of sistergirls back then; I used to go out with them and talk about things, like how to act like girls you know and be lady-like. One lady, I use to call her Mum, she was like a mother to me, and she told me, 'You just have to be who you want to be, baby, just like me. I'm always here for you, you got me here'.

(cited in Clarke, 2015)

Caring for children is not just part of the social role, but also sister-girls and brotherboys know the importance of supporting one another. Often, Crystal and Brianna say they call themselves sistergirls because they treat each other like sisters (ACON, 2010; McCrum & Canny, 2009; O'Saurus, 2014). This is especially important when taking into consideration the difficulties sistergirls experience in childhood and with their families.

Childhood and family

As children, several sistergirls and brotherboys spoke of how they were often mistaken for the 'other' gender. In an episode about brotherboys on *Living Black* (Murphy-Oates, 2015), broadcast on National Indigenous Television, Taz says he 'was extra masculine, overly masculine. A lot of people would mistake me for a boy' (cited in Murphy-Oates, 2015). Similarly, Brianna 'was really feminine as a little boy' (Curtis, 2015, p. 37), describing herself as a 'chubby little sistergirl – long hair – everybody thought I was a little girl' (p. 36), and 'I always used to get misgendered and mistaken as a girl' (p. 37). Erik was born in the NT and, when younger, he often faced 'discrimination because I was always looking and acting like a boy/man. Yet most knew I was assigned female at birth' and, later in life, 'I use to get misidentified as a butch lesbian a lot'. Like the non-Indigenous trans people mentioned in Chapter 2 sistergirls and brotherboys also engage in cross-gender play. Kooncha 'remember[s] when I was about 13, I used to love wearing purple or mauve and I loved red. So, I'd wear those colours' (cited in ACON, 2010). Francene's cousins 'used to dress me up as a girl. Put ribbons in my hair and all those sorts of things and they used to get me to do a dance' (cited in ACON, 2010). She thinks very highly of her childhood: 'All I wanted to do was play hopscotch, I didn't want to play the boys games' (cited in ACON, 2010). Brianna's grandmother once caught her 'dressed up as a girl [. . .] I was dressed up in her clothes' (cited in Riley, 2013), she responded by saying: 'At the end of the day you can wear whatever you want because as long as you're happy it doesn't matter' (cited in Riley, 2013). However, how parents and family members react to sistergirls and brotherboys is not uniform. Laura did not have a positive reaction from her family:

When they used to see me dressed up, with the skirts and tops, they used to come and hit me, whack me with a stick, with a hose, and all kinds of things he used to hit me with.

(cited in McCrum & Canny, 2009)

Simone (Ceduna, South Australia), was teased as a child but at the time she was unsure why:

I didn't know what I was, but I knew I was different. Getting teased, from people calling me 'gay'. I didn't know what gay was. I didn't even know about that. I didn't even know about sistergirls until I was 22.
(cited in Clarke, 2013)

Brianna was also teased at school: 'I left high school because there was a lot of bullying' (Curtis, 2015, p. 37). Erik also was bullied at school and he specifies that this was because of his ethnicity; both 'white and black kids at school and at rugby games wanted to fight with me, when I was young because I was different'; he goes on to say that 'the white kids called me black c . . . and the black kids would sometimes call me white c . . .'. Thus, Erik 'had a sense of living in both worlds on the race agenda for a long time'. He also raises problems he has had in relationships, stating that 'one of my partners at the time used to get violent with me' and 'one of my partners, when I was young, forced sex upon me as well as domestic violence'.

Laura came out to her parents as a sistergirl when she was age ten, she says:

It was really, really, very hard for me to come out because my parents are really strict and didn't want me to be out there as a sistergirl. They wanted me to be saved.

(cited in Clarke, 2015)

She began living as female when she was 16, stating she had to 'fight and fight and battle hard to be accepted' (cited in Clarke, 2015). She had to go live with her aunt in Darwin, who accepted her, telling her: 'Be safe here with me, I don't want you to be out yet. I accept you to be who you are, but I don't want people to hurt you' (cited in Clarke, 2015). Some young people struggle alone, in their community. Kooncha says that 'a young sistergirl growing up in our community, the road isn't always easy you don't always have that support they leave home quite young' (cited in ACON, 2010). Brianna says in addition to being alone some young people are forced to go through inappropriate cultural practices:

Sometimes a sistergirl living in a remote community, a sistergirl is living all by herself, feeling the pressure of cultural men's law and all that, which is usually forced upon young boys becoming men.

(cited in Riley, 2013)

Aboriginal cultures are highly sex-segregated. Kai was not only aware of the physical differences between himself and his peers, but also the gendered cultural practices. In his contribution to Hodges' (2015) anthology, Kai says:

I got depressed when I got to puberty. My mates were changing, and I was changing in a different way. I remember thinking: 'I'm different from these guys, and I'm not one of those girls, then what the hell am I?' For as long as I can remember, being separated from my mates by gender during ceremony and Corroboree would upset me because I was being taken away and put into a group where I didn't belong.

(Clancy, 2015, p. 106)

Crystal was born in the Tiwi Islands, approximately 80 km north of Darwin; her mother is from Tiwi, and her father is a Warlpiri man. For 20 years, she has been a very prominent advocate for sistergirls and she is one of the founding members of Sisters & Brothers NT. In 2012, she was elected to the Tiwi Island Shire Council and in doing so, she became the first sistergirl and transwoman to be elected to public office in Australia. During her childhood and adolescence she and members of her family were verbally harassed, physically assaulted, and raped because she is a sistergirl. Although Crystal's father knew that she was a sistergirl ('they seen me with long hair, so feminine, still playing with the girls'), she was forced to go through initiation: 'My father thought that putting me through men's business would change me, but it didn't' (Johnson, 2015, p. 23). Attempts to regulate her gender identity were not limited to her; Crystal's mother, brothers, sister, and grandparents were also held responsible for her being a sistergirl. In Indigenous cultures, this is known as payback.

Crystal's mother was a Tiwi Island woman, she was respected, she had a name; however, this did not stop her being bullied, spat and pissed on, and

bashed. But it was never talked about: ‘Everything was all quiet. Hidden. I wanted to bring it out, but I couldn’t’ (Johnson, 2015, p. 24). She goes on to say:

My mum used to fight back. She was always a fighter. She was the first Aboriginal woman to hold a black belt in karate and Taekwondo. She flogged all them big Warlpiri women. She would never back down for anyone.

(Johnson, 2015, p. 24)

Her mum tried to protect Crystal:

She would put me behind her back, and my father’s family would slap my mother around and then piss on her. Like a dog. They would turn around and say your son is a queer cunt. That’s why I have a problem with the word queer. It affects me in a bad way.

On Crystal’s 18th birthday, her mother called her and family members to the local park. She said:

‘Well, I want this for you. Here, your debt has been paid’. She just grabbed the knife from the birthday cake and she cut her throat in front of me. My uncle and I tried to stop the bleeding but the cut was just too deep. My step-father called the ambulance but she died instantly.

(Johnson, 2015, p. 24)

Crystal doesn’t describe this as suicide: ‘All of my family committed suicide. But it’s not suicide, it’s family guilt’. Crystal’s brothers also committed ‘suicide’ out of family guilt and because of payback. Often, payback was meted out in men’s business. ATSI cultures are highly sex-segregated and rituals of attaining adulthood are embedded in men’s business and women’s business.

In men’s business, her brothers, her sister, and she herself were raped. Crystal says that her eldest brother had his hair cut off and he was raped during his initiation: ‘That was payback for me’ (Johnson, 2015, p. 23). While crying, she says:

When they abused my brothers in business camp . . . they still don’t talk to me. They raped my brothers, for my sexuality. And I said, why can’t they stop? Why can’t they rape me? I’ve been raped, I’ve been gang raped. But don’t do it to my family and my brothers.

Crystal's brothers, like her mother, tried to protect her:

When they did that to my brothers, my little brothers stood up, just took everything. When you go on men's business, you've got no clothes. They cut me in the head, my brother got stab marks all over his body. [. . .] They stood in front of me. I said, let them kill me. I am proud to die who I am. My brother did it for me.

Crystal and her family were pressured into silence. They were warned that if they told the police or doctors, 'they would go around to my family's house and shoot them' (Johnson, 2015, p. 23). Similarly, when talking about her sister being raped in business: 'I tried to report it to people, but if I did it would be big controversy with my family, mother's family. It's why I moved away from my community'. One of her brothers died during men's business. She said:

It was like death in custody and I couldn't report it. I knew I had to keep my silence [. . .] we couldn't say anything. When its men's business you can't say anything.

Crystal believes that her father took one of her brothers' lives away. After the ceremony, her brother became homeless in Darwin; which is commonly referred to as long-grass. He committed suicide by overdose. Another of Crystal's brothers was bashed; this too was payback. He ended up in a wheelchair, with kidney problems, and drank a lot. She says:

There was this vicious cycle, you know, trying to run away from the pain but you can't. You get all these violent things happen to you – how can you forget about it?

(Johnson, 2015, p. 23)

Payback also occurs outside of men's business. Crystal says: 'They do it in business and they do it on the street' and it would also include 'the silent treatment. They abused my mother, my mother's sisters would turn away'. In addition to Crystal's mother and siblings, 'they speared my grandfather and other women cracked my grandmother's head with an Aboriginal spike. It's been passed on from generations'. Crystal sobs. She is clearly traumatised by the events that befell her family. She hopes that her mum would be proud of her. She laments that she was unable to help her mother and brothers: 'I was young then and more naïve' (Johnson, 2015, p. 25). Hence, she is adamant that she wants to tell her story. She wants others to know what has happened to her, her family, and what is happening to sistergirls. Crystal

has tried to help others in her community: Laura Orsto is one of them. She is a sistergirl, also from Tiwi, who speaks of how her father threatened her; she says: ‘My dad said to me: “I’m gonna take you out to the bush to take you down to the bush and shoot you in the head with a gun and leave you dead”’ (cited in McCrum & Canny, 2009). Crystal intervened, Laura says: ‘She said to my dad: “You’re not allowed to do that. You have to accept her to be who she is”. Now today, my dad accept me what I am’ (cited in McCrum & Canny, 2009).

Others have spoken of the support they have received from family. It is widely agreed that family is important for transgender and sex/gender diverse ATSI people. Taz says: ‘You need family to be able to conquer things’ (cited in Murphy-Oates, 2015). When Lillian told her mother:

I just cried on the phone, my mum just cried as well. She said I love you, whatever you do, I love you. And I thought that’s all I really wanted to know. I’ll hold you to that mum, that carries me through my life all the obstacles I’ve lived through.

(cited in ACON, 2010)

Rosalina talks about her coming out in an interview on the programme *Deep Trans* (O’Saurus, 2014). When Rosalina was 16, it was her mother who asked her: “‘Are you a sistergirl?’” I said: “‘Yes mum I am’”. She gave me a big hug. And said: “‘I don’t care who or what you are, you’re still my baby”’ (cited in O’Saurus, 2014). Kai’s parents are both very supportive and they have joined him in his community work. When Kai was a child he saw Tony Briffa being interviewed on *Sixty Minutes* (Clancy, 2015, p. 104). Tony is an intersex activist and was the first out intersex person in the world to be elected to a government position. At the time Kai saw Tony in 2000, he was transitioning from Antoinette and this sparked a sense of familiarity within Kai. However, his mother explained to Kai that Tony was intersex and that Kai, therefore, was not like Tony. Kai says his mum ‘feels like it is a big burden on her for not acting when I was younger’ but reassures her saying she ‘didn’t have resources or support, and didn’t know how to act on it. Now she thinks that it’s her fault, which it’s not’ (Clancy, 2015, p. 105). Kai’s dad is ‘really fine with it’, and he goes on to say, ‘I was always close to my Dad but now I feel like I’m closer’ (Clancy, 2015, p. 105). Dean speaks of the time he realised he could get to marry as a man. Since the internationally renowned case known as *Re: Kevin* (2001),

transgender Australians can marry. Dean joined *FtM Australia*, an organisation for transmen, and he met Kevin, thus ‘once I finished my transition I wanted to marry the love of my life, the one person that had been there and walked through this whole journey with me’ (cited in Murphy-Oates, 2015). Dean’s experience illustrates a key element necessary for sistergirls and brotherboys, that is, peer support, which often comes in the form of established support groups.

Support groups and services

In the second decade of the new millennium, there exists dozens of transgender organisations in every Australian state and territory which provide trans individuals and their friends and families medical information, social support, legal advice, and a range of services both off and online. At the outset, it is important to distinguish between ‘transgender organisations’ and ‘gender clinics’. The latter, such as the Gender Dysphoria Clinic (GDC) in Melbourne, are primarily medical services controlled by the medical profession. This is not to say that ‘gender clinics’ are not significant because some have a long history, for example the GDC can be traced to the work of Herbert Bower in the 1950s at the Royal Park Psychiatric Hospital (1907–1999). However, I argue, it is the transgender organisation run for and by trans individuals which offers much-needed peer and social support. In Roberta Perkins’s (1996) review of Lewins’ *Transsexualism in Society: A Sociology of Male-to-Female Transsexuals* (1995), she writes that social researchers need to ‘move away from the influence of the clinic and go onto the streets’ (Perkins, 1996). The first two Australian transgender organisations, the Seahorse Society and the Gender Centre (formerly Tiresias House), were formed in 1971 and 1983 respectively. While some may dismiss the Seahorse Society as a ‘transgender’ organisation because it was founded as a group primarily for heterosexual men who ‘crossdress’, as noted in the previous chapter, interviews conducted by psychologist Neil Buhrich (1976, 1996; Buhrich & McConaghy, 1977; Buhrich & Beaumont, 1981) revealed that some members wanted to live permanently as women. According to Califa (2003), the reason that transgender individuals joined groups that were clearly only for crossdressers is because they ‘had to “piggy-back” on crossdressers’ publications and organizations if they wanted’ to exchange information and gain support (p. 198). In the 1980s, the dire situation of transgender individuals, especially those in inner-city Sydney, became the focus of the Sydney-based Australian Transsexual

Association. While little is recorded of this group, we do know that one of its members, Roberta Perkins, approached Reverend Bill Crews to use the Wayside Chapel Crisis Centre as a place for regular meetings of transsexual girls in Kings Cross. Then, as now, Kings Cross is an area of inner-city Sydney known for its prostitution and ‘seedy side of life’. Perkins also met Frank Walker, the NSW Minister for Youth and Community Services in 1983. The Gender Centre’s website (2016) states Walker was disturbed by ‘the semi-nomadic lives that young transgenders experienced, forced from their apartments by landlords and unable to get overnight residence in either a men’s or a women’s refuge’. It goes on to state: ‘The problem of homelessness was significant and providing transsexuals with a safe refuge was crucial. Most refuge services at the time would not cater for transsexuals’ (The Gender Centre, 2016). In October 1983, Tiresias House was established in the Sydney suburb of Petersham and it became Australia’s first government-funded organisation specifically for transgender people, run by transgender people.

In addition to family, it is widely perceived that transgender and sex/gender diverse people need the support of peers, informal and formal groups, and health services. One of the findings of the *Mental Health Study* (Hyde et al., 2014) emphasized participants’ ‘need to have people that they “can connect to”’, and the authors go on to say that ‘more services are required’ (p. 27). Similarly, the provision of services was a significant issue raised at the Sistergirl Forum (Costello & Nannup, 1999) and one of its recommendations was for: ‘Indigenous health services, including outreach services, provide counselling services for sistergirls, with this counselling ideally being provided by sistergirls themselves’ (p. 7). Brett Mooney, who works for the Queensland AIDS Council, says that as a service provider they are grateful for individuals such as Jeremy who

[p]rovide[s] us with as much education and awareness on his journey so we can make someone else’s a lot easier. Jeremy is kind of setting himself up to look after the next youngest, who are coming through with the right care, the right attitude, and the right love.

(cited in Whyte, 2016)

Ensuring that Indigenous health services are educated about trans issues is doubly important because sistergirls are reluctant to use these services.

The authors of *2 Spirits* claim that ‘sistergirls generally avoided Aboriginal Medical Services primarily due to concerns about confidentiality’ (O’Loughlin & Phillips, 2011, p. 12). Francene agrees: ‘The only sad part of the whole set-up here is our sistergirls are afraid to utilise our medical centres’ (cited in ACON, 2010). The *Mental Health Study* (Hyde et al., 2014) recommended that ‘both Aboriginal and non-Aboriginal health services must do more to meet the health needs of sistergirls and brotherboys’ (p. 65).

Crystal, Brianna, and others founded Sisters & Brothers NT in 2014, which is an Alice Springs-based advocacy and reconciliation group for sistergirls, brotherboys, Indigenous, and non-Indigenous GLBTQI people. Crystal has been active in the community for years; after her mother died she moved to Sydney. But, she said:

I lost my culture, but my culture was waiting for me [. . .] something told me to come back home. I could make a change. I see the deaths from HIV and people committing suicide, the trans gay community, drugs. [. . .] My heart just belonged back to my community.

The first thing she did was campaign for sistergirls to use the women’s shelter, which had been provided to the Tiwi community. With the assistance of others she wrote a letter to the funding body and as a result these groups ‘started talking and educating them about gender rights and gender equity, and talking about how you can help people’ (Johnson, 2015, p. 30). Shortly afterwards, Crystal was banned from the local club for using the women’s toilet. Thus, in 2003, with the help of the Darwin Community Legal Service she made a complaint to the NT Anti-Discrimination Commission. In 2006, the club apologised, paid her compensation, and agreed to do some anti-discrimination training. She says: ‘A lot of people look upon that as a big achievement for sistergirls’ (Johnson, 2015, p. 31). This inspired her to run for public office and, as noted above, in 2012 she was elected to the Tiwi Island Shire Council. Crystal is active in the community because she believes ‘silence is not the way to go because people die from silence. Silence is a killer’.

Brianna says she never had spoken publicly about being a sistergirl until:

We lost a young sistergirl to suicide who was sixteen years old. That young sistergirl who was bullied and had no way out decided to take

her own life, and she was a beautiful, gorgeous young girl. It's really heart breaking for us older sistergirls.

(Curtis, 2015, p. 44)

Thus, she and others reached a point where 'we've had enough of this'. Brianna goes on to say 'there's no other organisation willing to support us, and that young sistergirl's death could have been prevented but she had no support at all. Let's make our own organisation' (Curtis, 2015, p. 44). As will be explored further in the next chapter, suicide has also been a catalyst to bring communities together. Vivian (Tiwi Islands, Northern Territory) says: 'We said we've had enough of what had happened to these girls who committed suicide' (cited in Clarke, 2015). Although it is not possible to know how many sistergirls and brotherboys have been lost through suicide, it is often spoken about as one of the most pressing issues that communities, advocacy organisations, and health services must address. Lillian says: 'There have been so many lives lost, through violence, sexual abuse, homophobia, which contributed to attempted suicide and eventually suicide' (cited in Burin, 2016). In many of the news articles, documentaries, television appearances, and YouTube videos in which Crystal, Brianna, and others speak, they raise the importance of suicide. For example, in the documentary *Sistergirls*, Crystal states that ATSI people 'think you can make them change. You can't make that person change. When you do that, you make them commit suicide' (cited in ACON, 2010). In an article published by ABC News, Brianna says, 'we've lost a few members in our community to suicide . . . and that's why we are bringing it out there [remote communities], to make a change' (cited in Sleath, 2014). Others also speak of losing friends and loved ones to suicide. Jo Stott (Tiwi Islands, Northern Territory) says: 'I've lost a couple of friends to suicide and all that' (cited in Clarke, 2013). Laura speaks of an elder sistergirl who was her mentor: 'We used to talk on the beach all the time about life' (cited in Clarke, 2015) and, while she told Laura to never commit suicide, the elder sistergirl took her own life. Laura reflects: 'It turned out that she would do that to herself. And what's really sad [. . .] she told me not to do that silly thing' (cited in Clarke, 2015). As Brianna stated above, suicide is a driving force for organisations such as Sisters & Brothers NT.

Since they have been together, the group has provided support to not only trans individuals but also organisations across the Territory, as well as nationally and internationally. In addition to speaking to various media, Crystal, Brianna, and others also participate in public forums to which community organisations, health services, and government representatives are invited. And they have already brought about some significant changes. In 2014, Sisters & Brothers NT successfully campaigned for the Alice Springs Women's Shelter to accept sistergirls and transwomen, and their media campaign in 2015, drawing attention to the plight of trans prisoners in the NT, led to a change in government policy. They also produced the publication *Voices from Our Community* in 2015 (Sisters & Brothers NT, 2015). Yet, the need continues. Nyarli (Tiwi Islands, Northern Territory) says:

What we really need now is some specialised services to deal with sistergirl issues. We [older sistergirls] just want up-and-coming sistergirls to go straight forward with no problems, no struggles. We don't want them picking up the pieces.

(cited in Clarke, 2015)

One of the problems Sisters & Brothers NT has identified is a reluctance by services to at least acknowledge the existence of a problem. Starlady says:

There are a lot of health bodies that are completely ignoring it, saying that that doesn't exist in remote Indigenous communities or they are putting it into the too hard basket.

(cited in Clarke, 2013)

Although it is a good sign services attend public forums at which Sisters & Brothers NT talk, Brianna says that unless they implement changes and educate their staff, 'it's just a waste of time'. Another limitation of the organisation is they are all volunteers. Brianna says: 'We don't get any funding, only donations to produce resources, educational resources to send out to communities'.

Crystal's plea is clear: it's the remote areas in the greatest need. She says:

There's no awareness of these sort of issues that we live in. Why I say that we need to educate our people about these issues, especially in

remote areas we don't have the facilities to have hormone treatment, we don't have counsellors, we live in remote community when we live on Tiwi Islands or Arnhem land or Alice Springs, it's really hard.

(cited in Brockie, 2013)

Brianna also raises the issue of language, for 'a lot of Indigenous people in community, English is the 3rd or 4th language and they can't read well' and she says that 'we actually produce posters in language'.

In addition to organisations, sistergirls and brotherboys are supporting each other. Peer support is essential and several have spoken of how it is other sistergirls and brotherboys who helped them. Jo Stott considers herself 'one of the first matriarchs or one of the oldest who started this thing off in the beginning' and she goes on to say:

For 15 years now, we've been talking and talking, and we still haven't been heard. I want someone to take it on, because I've been here a long time. If there was someone to take on what I do, I would always support that person. No matter what.

(cited in Clarke, 2013)

Laura reflects on the Elder sistergirls who helped her when she was younger:

There were plenty of sistergirls back then. I used to go out with them and talk about things, like how to act like girls you know and be lady-like. One lady, I use to call her Mum, she was like a mother to me, and she told me: 'You just have to be who you want to be, baby, just like me. I'm always here for you, you got me here'.

(cited in Clarke, 2015)

Rosalina is also grateful for those who came before her:

I thank the older sistergirls who have fought and passed away [. . .] I give them much respect for fighting for us younger ones who are living nowadays because they've paved the way and made it alright for us.

We don't cop as much as them back then. You have to be bloody really strong. Yeah, you have to be really strong.

(cited in Clarke, 2013)

Brianna talks about when she first met Crystal; she was eight years old. She says: 'Crystal is one of the first sistergirls I've ever met. At that time, being a little kid, that's when my curiosity started wondering about who I was' (Curtis, 2015, p. 36). And Crystal is thankful for those who helped her; she says: 'I thank them sistergirls, them older ones who made it easier for me' (cited in ACON, 2010). This is a glimpse into a key feature of traditional communities generally and sistergirl communities specifically – each generation helping the next.

In November 2016, sistergirls and brotherboys from across Australia came together in Wurundjeri country in Victoria at a government-funded weekend retreat was called Kungah. This followed on from a similar retreat which took place at Mt Bundy in 2007.³ An ABC News article quotes several participants: Vanessa (south-east Western Australia) is quoted as saying: 'Because a lot of our community don't have the support from family or community . . . a lot of our families reject us', and she goes on to say: 'All we can do is create a sense of ownership and that we are a family' (cited in Burin, 2016). Similarly, Lisa (Hunter Valley, New South Wales) says: 'I feel I'm with people just like me' and specifies that 'it's also a chance to build my support networks and to yarn about personal stuff that others in my community just don't understand' (cited in Burin, 2016). Maddy (Melbourne, Victoria) reveals, at the retreat 'there's a lot of stories of trauma and pain and suicide and death and violence', and as a result there is community building: 'The feeling is very much that people are giving each other acknowledgement and love, and really stepping up to care for one another' (cited in Burin, 2016). These brief excerpts from Kungah reflect a wider desire for sistergirls and brotherboys to reach out to one another, build their own families, and find solace from communities, both predominantly white transgender and traditional Aboriginal communities, in which they find it difficult being transgender and being Aboriginal.

In addition to Sisters & Brothers NT, another informal organisation is Sistergirls and Brotherboys Australia which hosts a Facebook page supporting trans Indigenous people. According to Dean, this was set up by 'one of our sistergirls, Lisa' (cited in Gloria, 2014). He says that now 'we've been able to connect. It's just been fantastic' (cited in Gloria, 2014). While there are significant barriers due to the digital divide, the Internet is a significant tool for sistergirls and brotherboys, especially those in remote areas, to keep

in contact. It has been an essential feature of the transgender movement since the 1990s. Whittle (1998) says:

Cyberspace has allowed networking on an unprecedented scale through the creation of that meeting point for transgender people. The mechanics of the new identity formation that has taken place in the community could not have existed outside of cyberspace.

(p. 405)

Similarly, while specifically referring to transmen, Cromwell (1999) claimed that the Internet has let them ‘put away the shame learned from stigmatization and to claim pride in their identities. [. . .] These actions will result in increased visibility’ (p. 143). The significance of the Internet remains in the 2010s. The recent project *From Blues to Rainbows* (Smith et al., 2014) notes that: ‘The Internet has helped to correct the invisibility and isolation that many groups feel, including groups of transgender and gender diverse young people’ (p. 84). Kai has been using the Internet since he came out. At first he ‘was following lots of blogs’ which he notes is common for young people; he goes on to say, ‘this is happening with lots of people my age on the social site Tumblr – you have your own blog’ (Clancy, 2015, p. 107). He has also been documenting his journey and his physical transformation: ‘I’ve been making YouTube videos since I began my hormone replacement therapy. I love being able to show how much I’ve changed’. But he isn’t doing this just for himself:

It’s good for other people too, I guess. I use it to document my progress and see all the differences in myself over time. For other people, it’s a really good resource for motivation and also a referral tool for people who might be going through the same thing.

(Clancy, 2015, p. 107)

Sisters & Brothers NT has employed innovative ways of communicating with individuals in remote communities. For example, in 2014, Brianna says: ‘We’ve been distributing USB sticks with interviews, showing the sistergirl documentary’. This technology enables them to overcome the problem with language, mentioned above. It was ‘very efficient’, adding, ‘that sort of thing is what worked in Indigenous communities, that stuff spreads’. On one day: ‘I was handing them out and it’s like these were places I’d never been to and they were like: “No we’ve seen that one”’. When Sisters & Brothers NT inquired how they had seen it, they said the USBs had been passed around and “we’ve got it on our PlayStation now”. Because they watch movies on their PlayStation’. This outreach activity is

commensurate with current research conducted by Carlson and colleagues, who have found that Aboriginal Australians are using social media platforms in help-seeking and help-giving.

Conclusion

While it has been suggested in both historical and contemporary accounts that Indigenous queers do not exist, oral histories reveal otherwise. The fact that some Indigenous languages include words for those we now refer to as sistergirls and brotherboys is itself an indication of their existence in traditional cultures. However, this should not be interpreted as acceptance. Some sistergirls and brotherboys have been accepted by their communities and others have not. As this chapter illustrates, acceptance of sistergirls means that they take on the social role of women. Whereas rejection can take the form of payback – for example, not only was Crystal punished by her family and community, but other members of her family were also verbally harassed, physically assaulted, raped, and driven to suicide because she is a sistergirl – reports also suggest that some have been murdered by the communities. Because of rejection, suicide is a huge issue among these communities. In reaction to familial rejection and the high rates of suicide some sistergirls and brotherboys, as well as non-Indigenous allies, have formed organisations to combat these issues. Advocacy groups such as Sisters & Brothers NT, Facebook pages such as Sistergirls and Brotherboys Australia, and the weekend retreat Kungah enable Australia's sex/gender diverse First Peoples to create new families and communities. This illustrates that for sistergirls and brotherboys being Aboriginal is just as important as being transgender. In the next chapter, it will be discussed how sistergirls and brotherboys navigate the tensions between the desire to transition with medical assistance as well as participate in traditional cultures, namely the desire for sistergirls to be accepted in women's business and brotherboys into men's business.

Notes

- 1 It should be noted, sistergirls and brotherboys are mentioned in a Senate Select Committee on Health in 2015.
- 2 I was invited to be part of the NT Department of Correction's Working Group in 2016.
- 3 See Sistagirl Retreat Mt Bundy, 2007, NTAHC History Project, www.ntahc.org.au/node/533.

5 Being transgender, being Aboriginal

This chapter discusses how sistergirls and brotherboys struggle to find a balance between being transgender and being Aboriginal, which are sometimes seen as incompatible. Some individuals are torn between two cultures and feel like they must choose one or the other. Kai (Waka Waka/Wuli Wili, Queensland) writes:

There are people coming out as transgender who are Aboriginal, and there are people coming out as Aboriginal who are transgender! They didn't really identify in the past with being Aboriginal, because they thought that they lost it. Which is something that I considered as well – would I lose my culture for this transition?

(Clancy, 2015, p. 109)

As illustrated in the previous chapter, some transgender Aboriginal and Torres Strait Island (ATSI) people experience verbal harassment, physical assault, and rape, as well as suicide. Being transgender and being Aboriginal can result in rejection from both traditional communities as well as predominantly white transgender communities. Thus, sistergirls and brotherboys experience double-discrimination in the form of transphobia and racism. Australia's sex/gender diverse First Peoples are not the only ones attempting to resolve the tensions experienced along the gender/ethnicity axis. Based on their research in the USA, Bith-Melander and colleagues (2010) claim that 'for transgender people of color, negative psychosocial consequences are heightened by experiencing the cumulative effects of racism and transgender stigma' (p. 208). Nor are sistergirls and brotherboys the only ones navigating those intersecting and overlapping spaces in between traditional and modern societies. There are many Indigenous peoples across the globe who have feet firmly placed within two societies. Although transgender theory has been dominated by the Global North, Stryker (2006) states that 'various non-European, colonized, and diasporic

communities [. . .] have begun to produce entirely new genres of analysis' (Stryker, 2006). Similarly, Alexeyeff and Besnier (2014) suggest that sex/gender diverse peoples are

[o]n the cutting edge of their own societies, and their position constitutes a third way in which we conceptualize the edginess of gender [. . .] they are also the heralds of the new, the experimental, and the exogenous.

(p. 2)

This chapter explores several of these 'new genres' and 'heralds of the new' and proffers them as a scaffold onto which to frame the lived experiences of sistergirls and brotherboys, especially their ways of navigating being transgender and being Aboriginal.

Being transgender

Some aspects of 'western definitions of transgender' are incompatible with being sistergirls and brotherboys; however others are not. Namely, perhaps the most central aspect of western transgender is a diagnosis of gender dysphoria and transition with medical assistance through hormone replacement therapy (HRT) and sex reassignment surgery (SRS). In many ways, this is not dissimilar to the lived experiences of other transgender people living in the Northern Territory (NT) or Australia more broadly. However, there are barriers in place for sistergirls and brotherboys accessing HRT and SRS, such as living in remote communities. Rosalina (Alice Springs, Northern Territory), says that 'a lot of sistergirls and brotherboys would like to go through [HRT], and especially when you're living in a remote community it's really hard' (cited in Riley, 2013). Catherine (sistergirl, 30), who lives in a remote area, says, 'there's hardly any doctors that help with admitting hormones and that's especially out bush', and she says she has not undergone HRT or SRS because there are 'hardly any doctors [who] deal with Sistergirls issues'. Brianna (sistergirl, 32) 'wanted to go for the reassignment surgery straight away when I was about seventeen'; however, she knew that because she was living in 'a small redneck town like Alice Springs' this would not be possible 'at that time with no support and nobody around me, feeling isolated, I didn't have the courage to do it' (Curtis, 2015, p. 39). Brianna also says:

It was taking for ever to access HRT here in the NT. All of these barriers, yeah I just got sick of it. I just wanted to go to a place where . . . [Rosalina] went before me and she rang me up and said she started

HRT straight away. So, well I'm moving down there too. I'm not going to live my life feeling incomplete.

Erik (brotherboy, 38), who was born in the NT, moved away when he was in his 20s because 'there was nothing for transsexual people to access' and he also states it was 'part of the reason I moved interstate'. Another barrier to transitioning with medical assistance is cost. Kooncha (Wallaga Lake, New South Wales) says: 'You have to realise that not every sistergirl can afford gender reassignment. It's quite a lot of money. When you're on the hormones, it's also quite a lot of money as well' (cited in ACON, 2010). In all measures of income, Indigenous Australians earn considerably less than non-Indigenous Australians. For example, 13 per cent of ATSI people 'report an equivalised weekly household income of \$1,000 or more' compared to 33 per cent of other Australians (ABS, 2012). Kai points out that either you can pay up-front 'or you can go through a public waiting list which is a long time' (cited in Murphy-Oates, 2015). For some, health problems often prevent people having SRS. At first, Francene's 'endocrinologist in Brisbane said I could go the whole way if I wanted to pursue it'; however she has 'a heart problem' and because 'it's a serious operation, they said that it would be wise for me not to' (cited in ACON, 2010). Language also prohibits transition with medical assistance. As mentioned in the last chapter, for many sistergirls and brotherboys English is their third or fourth language. Thus, as Brianna says: 'They don't speak English very well, they are not going to go to a big city, they're not going to relocate to a big city where they don't know anyone'.

Many sistergirls and brotherboys speak adamantly about the discomfort with their bodies which is not only a central part of the diagnosis of gender dysphoria but it also led them to the decision to start transitioning with medical assistance. Laura Orsto (Tiwi Islands, Northern Territory), says:

I want to start hormone therapy. I really want to have this transition. I just hate that I am this girl trapped in a boy's body. She's been trapped in there for a long long time and she really wants to come out and be a real lady.

(cited in Clarke, 2015)

For Kai, his pre-transition body bothered him to such a degree that 'I want to literally rip myself to shreds. Not in self-harm, but I feel like . . . you're trapped inside something you shouldn't be'. Taz (Townsville, Queensland) describes it as being 'like a prisoner of your body. You want to be this person, but the outside says otherwise' (cited in Murphy-Oates, 2015). Brianna is of the view that 'being sistergirl and trans can be really embarrassing

because sometimes we feel ashamed about our body'; what is troubling for her, and others, is that 'we don't want anybody to invade our privacy' especially when they go to see a doctor, she prefers to see a woman doctor or nurse (Curtis, 2015, p. 42). In addition to discomfort with their bodies many also experienced depression. For example, Kai says: 'I've been really depressed some days, I didn't want to go out, I didn't want to be active in life' (cited in Murphy-Oates, 2015). Similarly, when Simone (Ceduna, South Australia) dressed 'like a boy' she felt 'depressed. It feels really awkward and I feel uncomfortable' (cited in Clarke, 2013). Dean (Wiradjuri, New South Wales) transitioned in his forties, prior to which 'I'd been involved in the lesbian community most of my life and I was comfortable. Even being a woman. But I wasn't happy' (cited in Murphy-Oates, 2015). Erik has 'suffered from anxiety and depression for a long time', and he identifies three main reasons; the first is a car accident, the second reason is because of 'the stress of being a transsexual growing up in a conservative background', and finally 'due to my family being of Stolen Generation'. On the one hand, Crystal (sistergirl, 45) is happy after starting HRT. On the other hand, 'I felt, uncomfortable within my body, because I wanted . . . It's more or less, a man with a penis' (cited in ACON, 2010). She goes on to say, 'there is something there that shouldn't be there', and it is getting in the way of her happiness: 'I know that when I am happy is when that thing is gone. [. . .] I feel bad coz that thing is there' (cited in ACON, 2010). Because of the body discomfort and depression, it is common for sistergirls and brothertoys to turn to drugs and alcohol.

At the First National Sistergirl Forum (Costello & Nannup, 1999), 'alcohol and drug use issues' played very prominent roles. Jeremy (Fremantle, Western Australia), like Dean, was also in the lesbian scene before he transitioned, and he 'remember[s] it being a pretty self-destructive time. A lot of drinking and a lot of partying. Not really doing good things for myself. Very directionless' (cited in Downes, 2016). Taz lost both his parents as a child – this and his questions about gender led to 'drinking a heap and my mental state was down in the gutter', and he goes on to say he didn't

[w]ant to be out in public no more coz you're ashamed of yourself. You can't talk to people about it coz it's an awkward topic and no one really knows about it.

(cited in Murphy-Oates, 2015)

Brianna also went through a period before her transition where she 'felt that I was going downhill a bit, like drinking way too much, hanging around the wrong people and getting in a bad crowd' (Curtis, 2015, p. 40). In her interview with me, Crystal says, when she went to Sydney, she got into

drugs and alcohol, which ‘made me forget about being Aboriginal. I lost my culture’. She went into rehab when she went back to Darwin (Johnson, 2015, p. 25).

For many sistergirls and brotherboys, body discomfort, depression, and problems with alcohol are severe enough to overcome the barriers of geography, finance, and health, and those who are on HRT speak highly of the results. Kooncha says, ‘when I first popped my first tablet. It was such a relief. I felt like I was living my own life’ (cited in ACON, 2010). Although Brianna lives in Sydney, she travels back to Alice Springs often and she has had a lot of positive feedback after being on HRT for two years:

I’ve had some really good feedback since I’ve been home. All of my family, and friends have been awe-struck. They’ve seen me on Facebook, but to see me in person is different. They say I look really well. I look pretty.

When Jeremy began HRT his ‘understanding was that it was going to be instant’, but he soon realised ‘it’s not like that’; he goes on to describe how ‘I stopped getting my period, my voice got deeper, I started getting facial hair’ (cited in Downes, 2016). He also speaks of how ‘your body has got to start adjusting to hormones. Basically, you go into a teenage boy state. So basically, I became a horny teenage boy’; however, he’s not sure if this is because of ‘the hormones or you’re just starting to change the way you think’ (cited in Downes, 2016). The success of HRT is just one aspect of being transgender; many sistergirls and brotherboys are now living in their affirmed gender, and speak of the acceptance they receive as women and men. Crystal says, ‘when I walk out the door, I’m Crystal. I want the world to look at me as Crystal’ (cited in ACON, 2010). Before moving to Sydney, Brianna lived in the Tiwi Islands and worked at a supermarket:

I am classified as female in my workplace and to them I am female. I love living there. It has been very eye-opening. I have been able to let my hair down and be true to myself. As soon as I moved there, I got rid of all my male clothing and live my life as a woman, as a lady now.
(cited in O’Saurus, 2014)

Simone reflects, ‘when I’m sistergirl I feel 100% true to me and I feel happy’ (cited in Clarke, 2013). Laura is appreciative of the support she gets from her community: ‘I love to talk to everyone, and everyone has been nice to me and they don’t put me down, they put me up the top’; she goes on to report that they say to her: ‘Wow, you have a nice personality, Miss Laura’ (cited in Clarke, 2015). Dean speaks proudly of not just being a brotherboy,

but he says: 'I'm a husband, I'm a father. I'm a stay-at-home dad', as well as 'I'm a Wiradjuri man' (cited in Murphy-Oates, 2015). Thus, affirming one's gender, living as women and men is an indispensable part of being transgender, and for sistergirls and brotherboys so too is being Aboriginal.

Being Aboriginal

As mentioned by Kai above, some trans people are 'coming out as Aboriginal'. He clarifies this by saying: 'They didn't really identify in the past with being Aboriginal, because they thought that they lost it' (Clancy, 2015, p. 109). Elsewhere, he says: 'I thought I might have to sacrifice my culture just to be happy in my body' (cited in Gloria, 2014). Brianna says that many sistergirls 'don't want to leave their community, they are happy being in their community, working or being around family' and thus they don't transition with medical assistance. She goes on to say: 'They just prefer to stay in their own communities. There are a lot of sistergirls who have been living as women for years, but still haven't had access to medication'. Hence, for many sistergirls and brotherboys, Aboriginality remains a key part of one's identity; even for those who did not grow up in traditional communities. What is taking place in trans Indigenous communities is a balance between being transgender and being Aboriginal and a reconciliation of the inevitable tensions between western and traditional cultures. Crystal says: 'We had to adapt, because being colonised, being modernised, being trans and being different we have to mix and match with everything in our communities' (cited in Brockie, 2013). Much of this isn't necessarily a fight against traditional Indigenous cultures per se, rather the influences of the west on those cultures. Brianna says the stigma that 'being gay, lesbian or transgendered is actually a bad thing and that's very common because of European and church colonisation' (Sleath, 2014).

For many ATSI people, being Aboriginal means living with racism. At the First National Sistergirl Forum (Costello & Nannup, 1999) racism was highlighted as one of the issues for sistergirls (p. 6). Often this racism exists in predominantly white transgender communities and, thus, sistergirls and brotherboys struggle to feel connected to these communities. Pflum and colleagues (2015) reveal that Caucasian transgender and sex/gender diverse people are likely to 'feel more connected to the trans community than their ethnic minority peers' (p. 284). When Kai attempted to challenge racism in the transgender community, a transwoman questioned his Aboriginality. Of the incident, he says:

And this is in the trans community! You'd think they'd know discrimination when they see it. [. . .] It's just people outside the Aboriginal

community who have this sudden power to judge others, and I see that in the trans community. It's a reflection of the broader population, too. (Clancy, 2015, p. 112)

As Jeremy says: 'People's idea of an Aboriginal person is very stereotypical. It's having black skin and doing traditional dances. It's not the case' (cited in Downes, 2016). Another example of racism in the transgender community is the suggestion that sistergirls and brotherboys are not transgender. In Chapter 3, I refer to how Sarah (transgender woman, 43) speaks of a hierarchy of 'levels' in the transgender 'scene' and the 'level' someone is on is dependent on where they are at in the process of transitioning. This policing of authenticity is extended to Indigenous people in Australia and overseas. Sarah considers:

The whole sistergirl thing, it's not even transgender, they're just little gay boys who dress up in their community. Sorry for being so rude, but like boys in the *fa'afafine*. [. . .] It's very similar to the Aboriginal sistergirls. That's what it's about, it's really got nothing to do with transgender.

She goes on to say:

It's not easy to be a transgender and for the sistergirls to say they're a part of that group is, to me, a little bit, not degrading but, we're not just chucking on a dress and put sequins on it, and running around acting silly.

As already mentioned, when speaking of trans people of colour in the USA, Bith-Melander and colleagues (2010) suggest that they experience the 'cumulative effects of racism and transgender stigma' (p. 208). By being transgender and being Aboriginal, sistergirls and brotherboys also experience transgender stigma or transphobia in traditional cultures. Brianna doesn't often experience 'discrimination or abuse from non-Indigenous people' (Curtis, 2015, p. 44); she says 'the majority of it does come from Indigenous men. And that experience is pretty common with other sistergirls as well' (Curtis, 2015, p. 44). Similarly, Lillian (north Queensland) says: 'Being a sistergirl, sometimes, most of the times I got abused, hit and punched, to have sex with' (cited in ACON, 2010). As a child, Lillian didn't know she could say no to the sexual advances from others:

When I was growing up I didn't know I had choices in men, I thought I had to accept what was given to me. If a dirty man came up and wanted to have sex with me, I'd have to give it up.

(cited in ACON, 2010)

Vanessa (south-east Western Australia) also experienced child abuse in Indigenous cultures: 'I ran away from home when I was 15 years of age because I was having experiences that no child should have' (cited in Burin, 2016).

As discussed in the last chapter, many ATSI families reacted quite negatively towards their sistergirl and brotherboy children. Despite issues of violence and rejection, Indigenous culture remains highly influential in the lives of sistergirls and brotherboys. This is especially true in the NT because there are many areas where contact with Europeans happened relatively recently. For example, according to Brianna, her grandmother's people, the Luritja, were 'the last tribe to be discovered in Australia', and her grandmother 'didn't come into contact with a white person until she was a teenager' (Curtis, 2015, p. 37). In wider Australian society, ignorance remains regarding the importance of traditional culture. In 2015, for example, Prime Minister Tony Abbott argued that the Australian government should not pay for 'lifestyle choice', that is, individuals who live in remote areas of Australia (Griffiths, 2015). Having said that, showing respect for Indigenous cultures doesn't mean one cannot question it when ATSI people's human rights are threatened.

As discussed in the previous chapter, when Crystal refused to conform to the gender norms of her society, payback was exacted against her and members of her family. On the one hand, payback is part of traditional culture, yet on the other hand, as she herself says, it violates Crystal's human rights. She says:

I see people suffer everywhere, right around the world, and I am suffering in Australia, land of opportunity. Where was human rights for me? Where was the gay movement for me? Where did I stand as a person? As a transgender lady? Where were the people to protect me and my people? I say to people; you don't know what it's like to be a black transgender woman. [. . .] A lot of people say, it's only a black thing. It's not a black thing. It's everybody's thing.

Not only is payback an example of transphobia in ATSI communities, but it also illustrates the tensions between ATSI customs and Australian law. Ginibi notes that when ATSI people enforce customs, 'they find themselves in trouble under Anglo-Australian laws' (Ginibi, 1994, p. 10). Similarly,

Goldflam claims that attempts at ‘mutual recognition and respect [. . . have] never seemed more out of kilter with prevailing legal norms’ (Goldflam, 2013, p. 71). Finnane suggests that at the heart of payback is ‘a restoration of the pre-existing order’ (Finnane, 2001, p. 293). Arguably, the ‘pre-existing order’ associated with the payback inflicted upon Crystal and her family is heteronormativity and the gender binary. Simply suggesting that a custom is traditional is not reason enough not to intervene. For example, domestic violence has been an ongoing issue in ATSI cultures and, according to Langton, perpetrators ‘make all sorts of excuses for the violence. They purport that this is the Aboriginal way’ (cited in Boserio, 2015). This has not stopped people speaking out against it.

Some trans ATSI people have made tentative approaches to their Elders so they can be included in gender-appropriate activities. Jeremy is struggling with not being able to do certain activities because of his body; he says: ‘They [the Elders] say one of the reasons I can’t play the didgeridoo is because I have ovaries, but I’m on testosterone I don’t get a period. I’m infertile’ (cited in Downes, 2016). He is understandably frustrated by the ‘hesitation to change’ and while he doesn’t intend to let it get in the way of him doing ‘what I feel is right and experience my culture because you don’t understand or don’t accept it’, he also intends to ‘tread very carefully and very lightly’ (cited in Downes, 2016). Max (Wagga Wagga, New South Wales) also ‘want[s] to connect with men’s culture’; however he is ‘just not sure how to go about it’. He goes on to say: ‘That’s something that’s really important to me. So I want to sit down and consult with elders about my transition’ (cited in Burin, 2016). Elsewhere, Jeremy reflects on his desires to be part of traditional cultures, but he fears rejection. He says:

If I come to these people in this community and say I am transgender, what are they going to say to me? Well, you can’t participate in your culture because you’re not a man. I fear they may not see me as a man or a woman. That’s the response I’ve gotten from some people, in Aboriginal communities so it makes me fearful to try and connect with that side of myself, because what if I get rejected.

(cited in Whyte, 2016)

His concerns are warranted because Zac (Atherton Tablelands, Queensland) was reject by his Elders; they told him he was not welcome: ‘Which is why I’ve spent most of my life in NSW. I found other brotherboys and they took me in’ (Burin, 2016). Some brotherboys have been welcomed into men’s business and some sistergirls have been welcomed into women’s business. Dean’s experiences have been very different to Jeremy and Zac; he ‘was

initiated into manhood a couple of years ago' (cited in Gloria, 2014) and his transition has been highly supported by the Elders. At first, he says he

[s]poke to some of the older women. We had a meeting, I explained my situation. They don't really talk much, but they know. They told me that they accept it. What was happening for me and they wanted to be part of it. I went through a smoking ceremony with the women.

(cited in Gloria, 2014)

After the ceremony, Dean was welcomed by the men through another smoking ceremony, since which he has been 'learning lots from the elders in my community. It's just been wonderful how they've embraced me and willing to teach' (cited in Gloria, 2014). For Dean, the ceremony is about belonging:

It is our spirit. It's our relationship to our land, our spirit. Our spiritual wellbeing. We can change our body to try and accommodate and suit our spirit but we can't change our spirit.

(cited in Murphy-Oates, 2015)

Unlike Crystal, when Brianna reached puberty her father respected her by saying:

No, it's your decision. You do whatever you want. If you want to go through it, you can go through it, but nobody's going to touch your body unless you say so.

(Curtis, 2015, p. 38)

Thus, 'I've never been through men's ceremony and I'm not intending to' (Curtis, 2015, p. 38). It is very important for many people to participate in gender-appropriate rituals and for sisters to be invited into women's business and brotherboys to be invited into men's business. For Kai, 'participating in men's business is a grey area' and while he knows it is some time away, he explains it in terms of his body configuration:

I think a lot has got to do with internal organs, like ovaries and that sort of thing. Carriers of life are considered women, for women's business. Once those are gone, and then the carrier of life from there is what the appendage is down there. Even though I don't have that, I think they are willing to have an exception. I just know I can't play the didgeridoo, and I can't participate in ceremony as I haven't had the go-ahead yet.

(Clancy, 2015, p. 109)

Brianna says her twin sister, Rosalina, has ‘been invited to dance with women a long time ago’, and she says ‘if I ever get the opportunity, I’ll go through women’s ceremony’ (Curtis, 2015, p. 41). In my interview with Brianna, she says that she and her sister have acceptance in their community and the Elders have ‘given us permission to do welcome to country’. Jeremy is still looking for his culture, and he says:

Where I come from is really important to me. I feel as though once I discover where I come from and more about my culture I’m going to feel more like my identity has been complete. If you know where your mob comes from you know, each mob has a different animal representing them. I haven’t got that.

(cited in Downes, 2016)

For many trans Indigenous people, being Aboriginal is a connection to spirituality. One’s Dreaming is an essential part of culture, community, and personal identity. When Crystal moved to Sydney and found others like herself: ‘I found my spiritual awakening’ (Johnson, 2015, p. 28). Brianna says that ‘sistergirls do understand and do carry the culture, and they know about things. I think it’s important that we do’ (Curtis, 2015, p. 42). She goes on to say:

A lot of the Tiwi Island sistergirls know all the songs and the dance for men and women. In the central desert, a lot of sistergirls know a lot of the secrets of culture and Dreaming.

(Curtis, 2015, p. 42)

Similarly, Crystal spoke to me about The Dreaming. She says there is an essential link between one’s self and place: ‘When you have a spirituality you sit under a tree and you were born under the tree, that’s your Dreaming, your totem. This is your country’. This connection to country is an essential part of ATSI identity. Crystal goes on to say:

We have song and dance, to prove that’s where you come from. Everybody has a title, everybody has a name, everybody has a country and a song and a place of birth. That’s what make Aboriginal people tick.

Several sistergirls and brotherboys refer to their affirmed gender in terms of their spirit. For example, Crystal says: ‘I’ve got a woman’s spirit inside of me’ (cited in ACON, 2010). Similarly, Kai says that inside brotherboys is ‘a boy’s spirit and they live through that boy spirit’ (cited in Gloria, 2014). Dean also describes his desire to live as a man as wanting ‘to live my man’s spirit’ (cited in Murphy-Oates, 2015). By demonstrating the significance of

not only a personal spirit, but also a spirit associated with country, it further highlights the trauma of rejection from one's family or community because they are sistergirl or brotherboy. Nannup is of the view that some sistergirls 'have left their home country, just so they may have some kind of a life. But we all know that without family and country we are sunk' (cited in Costello & Nannup, 1999, p. 4). Brianna is also of the view that 'sistergirls are being pushed away from their families' and thus they fall 'into depression, alcohol, substance abuse, suicide' (cited in Riley, 2013). As already mentioned, suicide is a huge issue for many sistergirls and brotherboys, especially those isolated in remote areas. A few years ago, the community on the Tiwi Islands reached a milestone when the traditional community and the sistergirls came together to mourn those who had passed because of suicide. Nyarli (Tiwi Islands, Northern Territory) tells reporter Allan Clarke:

We had a community meeting and one of the families wanted to know how the suicides happened, and basically they were all too blind to see that it was name-calling, that it was discriminating against her sexuality. As the years go by we have slowly worked our way up, building our confidence and just basically being out and living life as the Tiwi sistergirls.

(cited in Clarke, 2015)

Vivian (Tiwi Islands, Northern Territory) says, on the day of that meeting:

The local store, the council, the police station were shut. Everyone attended, including our families and classmates. I was quite young and about 20–30 of us sistergirls raised our voices there. We said we've had enough of what had happened to these girls who committed suicide.

(cited in Clarke, 2015)

The documentary *Eye* (McCrum & Canny, 2009) followed Bindi Cole's journey to photograph the Tiwi Island sistergirls. The sistergirls on the Tiwi Islands have attracted considerable media attention over the past decade and, while reports vary, it has been suggested there are between 40 and 80 people who are part of this community (Brockie, 2013; Clarke, 2015; Riley, 2013) which is roughly 5 per cent of the island's population (Brockie, 2013; Riley, 2013). In her appearance on the television programme *Insight*, Crystal was asked why there are so many sistergirls on the Tiwi Islands, and she playfully replied: 'There might be something in the water' (cited in Brockie, 2013). At the end of the documentary, the sistergirls perform *pukumani*, the death ceremony, for three sistergirls who had recently committed suicide. According to an unidentified sistergirl, 'no one had put a ceremony on for

them, so we are doing one on our own. If [the community] don't like it too bad' (cited in McCrum & Canny, 2009). Drag performer, Foxy Empire (Jason de Santis) (Tiwi Islands, Northern Territory) says that *pukumani* is

[t]hem leaving us, they are now with all our other ancestors. In Tiwi culture, we've been doing this for thousands and thousands of years. So inside our heart, emotionally and spiritually, we know we are meant to do it.

(cited in McCrum & Canny, 2009)

The night before the ceremony, another unidentified sistergirl says: 'I can't wait to give their spirit a big ceremony. Then, maybe we'll let go of them' (cited in McCrum & Canny, 2009). On the day, many from the Tiwi community turned up and Crystal was 'gobsmacked' that so many of her family turned up. Foxy too was 'freaking out when I seen that many people' (cited in McCrum & Canny, 2009). Crystal says, through *pukumani* the Tiwi Island community demonstrates its acceptance of sistergirls:

This is the first us sistergirls actually having the first ceremony and today we defy everything. Homophobia. All this jazz about sistergirl this, sistergirl that, it showed that there are acceptance in our community. Because, you know, Tiwi Island people are the most loving people in the world.

(cited in McCrum & Canny, 2009)

On the one hand, by performing *pukumani* the sistergirls found a common ground with the Tiwi community, and on the other hand they demonstrated to the community that in addition to being sistergirls what is important to them is being Aboriginal.

In March 2017, a group of 40 sistergirls travelled from the Tiwi Islands to Sydney and marched in the annual Gay and Lesbian Mardi Gras parade. The parade culminates a month-long festival and honours a protest march which took place in 1978, at which several participants were arrested by the New South Wales police. The annual event has become an international draw-card, but it is more than a celebration of diversity – it maintains its protest origins and each year community groups use the parade as a forum through which they call for equality. While it is not the first time that queer Indigenous Australians have participated in the parade, this year is the first time the Tiwi Island sistergirls have marched under their own banner. Leading up to, during, and at the end of their journey they received considerable media attention (Davidson, 2017; Dias, 2017; Palin, 2017; Soldani, 2017; Ting, 2017; Vanovac, 2017). In addition to giving due attention to the fact

that the contingent wore hand-printed traditional clothes as well as the glitz and glamour one would expect at Mardi Gras, the media also gave due consideration to the issues trans Indigenous Australians experience, such as suicide and community ignorance. Patricia Puruntatameri tells reporter Helen Davidson: 'We're just going to walk and wave to the people' (2017). Another sistergirl, Anthony Tipungwuti, interjects, adding: 'To say that we're here' (cited in Davidson, 2017). To which Patricia responds: 'And that we do exist' (cited in Davidson, 2017).

Conclusion

Sistergirls and brotherboys may be rejected from their community and family; this may lead to suicide or they may be forced to move away. If they move to a large city expecting to be welcomed into the transgender community, they are often again rejected because of racism. Thus, transgender and sex/gender diverse ATSI people experience double-discrimination and thereby being Aboriginal compounds the myriad issues of being transgender. Living in remote areas may mean that many sistergirls and brotherboys are unable to transition with medical assistance; furthermore the cost of hormones and surgery as well as transphobia or ignorance among health professionals can all be substantial barriers. Even if sistergirls and brotherboys are accepted by their communities, they may also be forced to leave their family and country. Unlike non-Indigenous people, trans Indigenous people are often torn between their gender and their ethnicity, forced to make a choice of either being transgender or being Aboriginal.

6 Afterword

Transgender Territorians' lived experiences are very diverse: they range from those who conform to more traditional notions of what it means to be transgender, such as becoming 'invisible' in the community once they have transitioned, to those who are 'out' as transgender advocates and/or identify as 'genderqueer'. It must be acknowledged, once again, that research into transgender people is invariably biased because those who have a transgender history and no longer have a need to talk about it may be overlooked. However, being transgender is no longer limited to those who desire sex reassignment surgery; others who use the term do not necessarily feel the need to transition with medical assistance. Moreover, some in the Territory challenge the notion of the binary and, for them, living as trans is less about transitioning from one sex/gender to the other and more about living outside of gender. Thus, the rich pantheon of identities and lived experiences among transgender and sex/gender diverse people in the NT is comparable to those throughout Australia and internationally. Over the past few decades, the Australian and international transgender literature has provided a baseline from which to compare more localised populations; this not only enables one to determine similarities, but also to map out those issues which distinguish one group of individuals from another. While on the one hand, trans people in the NT share issues with others nationally and internationally, on the other hand, many of these issues are aggravated by the fact that they live in a remote area of the country. Thus, it is argued that the findings of this research not only offer insights into the lives of trans Territorians, but also into those of transgender and sex/gender diverse people who live in similarly remote communities either in Australia and globally.

In addition to its remoteness, the NT possesses several characteristics which distinguish it from other parts of Australia; it is large, sparsely populated, and possesses a prominent Indigenous culture. Not only do more men than women live in the NT, it is also perceived as homophobic, 'ocker', and having a 'frontier mentality'. Some trans Territorians speak very fondly of

the Territory, others less so. Being transgender in the NT can be a problem, even the residential centres of Darwin and Alice Springs may be ‘too small’, especially for those who may be more flamboyant or ‘out’ as transgender. There is also an issue of social isolation, while friends and families may be supportive, not having other transgender people to talk to can be difficult. For some transwomen, opportunities to find dates are limited; they say that this is because cismen are reluctant to openly date transwomen for fear of being perceived as gay. While this is not unique to the NT, it is understandable that hegemonic masculinity would be felt more keenly in an ‘ocker’ culture. Undeniably, the most striking feature of the Territory is its size; subsequently, this compounds the issue of social isolation, but more significantly, it can make access to health care difficult. Even those living in Darwin and Alice Springs speak of the inadequacies of the health profession. Distance is not the only barrier to seeing a doctor, psychiatrist, or endocrinologist. At times, there are none, they are too expensive, or they have little to no knowledge of what transgender is. In some cases, medical professionals have been inappropriate, dismissive, and transphobic. Darwin and Alice Springs are known as training centres for medical students and once a set period is over, they leave. Further, many people within the health industry are not unlike the mining industry, that is, they are temporary residents, also known as fly-in-fly-out workers. This means that trans people feel as though they must repeat their stories and consequently they receive interrupted care. Social isolation and access to health care are two of the main push factors for trans Territorians to think about leaving. Each of the participants from the interview stage of the research had either left the NT or were thinking about leaving. Those who had left or have left since speaking with me almost all gave the same reason: to access hormone replacement therapy and sex reassignment surgery. This is perhaps the one issue which unifies this population. Although they love living in the NT and see it as their home; they feel a pressure to leave. As a result, many trans Territorians have become a displaced population.

This dilemma is felt most keenly among transgender sex/gender diverse Aboriginal and Torres Strait Island people. For sistergirls and brotherboys, being Aboriginal and being transgender can result in a conflict between traditional and western cultures. This tension is shared by sex/gender diverse First Peoples in ‘other’ cultures. One’s Aboriginality involves a connection to not only family and community, but also country. Moreover, these connections are not just ‘lifestyle choices’, they are generational and spiritual. While sistergirls and brotherboys may not occupy the same socio-religious roles as the *hijras* of India, the two-spirit peoples of North America, and the *bissu* shamans of Indonesia, as Aboriginal people The Dreaming is an essential part of their identity. The importance of tradition remains

prominent in the lives of sistergirls and brotherboys, even those who did not grow up or live in traditional communities. For some in the Central Desert, contact with Europeans occurred relatively recently. However, at times tradition conflicts with human rights and sistergirls and brotherboys may face rejection from their communities or experience verbal harassment, physical assault, and rape. For example, the custom of payback has meant that some sistergirls and brotherboys, as well as their families, have paid a heavy price for their gender transgression. For those who feel torn there is a concern that a sacrifice of either one's ethnicity or one's affirmed gender must be made. If one chooses to stay in one's community this may lead to further abuse as well as depression and suicide, which is very prevalent in sistergirl and brotherboy communities. If one leaves the community and travels to a large city, they are likely to face racism in the predominantly white transgender community. Thus, both options bring with them a loss of self and social isolation. Another barrier for sistergirls and brotherboys is language; English may be their third or fourth language and they may not speak it well. In recent decades, there have been some individuals who have stood up to their communities and refused to remain silent; they have fought for their human rights and formed advocacy and support groups such as Sisters & Brothers NT and Sistergirls and Brotherboys Australia. Thus, they have spoken out against customs such as payback and given voice to individuals who had hitherto been left out of the transgender literature. While sistergirls and brotherboys speak openly about their issues at public forums and to the news media, they have been overlooked by academic and government-funded research. It is hoped that, through this book, their voices can be added to the national and international chorus.

Recommendations

The purpose of this book is more than a report on the lives of transgender people living in the NT. It is anticipated that it will have a national and global reach, providing a framework for those who live in remote areas, away from the gregarious and resource-rich urban centres. Moreover, as someone who identifies as genderqueer, I do not claim to be a neutral observer; rather I wish to bring about social change. It is my intention that this research improves the lives of trans people living in the NT. As such, I embrace such feminist principles as Hanisch's (1970) 'the personal is political'. Furthermore, academia and social research are no longer dispassionate endeavours pursued by detached scholars locked away in their ivory towers. As indicated in Chapter 1, my research is informed by postmodernism, feminism, and queer theory, such that Seidman (1997) suggests that social theories 'take the form of broad social narratives' and 'are closely connected to contemporary

social conflicts and public debates’; moreover ‘these narratives aim not only to clarify an event or social configuration but to shape its configuration’ (p. 44). To this end, I now speak to several recommendations which can be taken away from this book. It is anticipated that health service providers, advocates, and activists, as well as academics, can employ this book or, at the very least, this brief overview to improve the lives of transgender and sex/gender diverse people living in the Territory and Australia’s sex/gender diverse First Peoples, also known as sistergirls and brotherboys.

Recommendation 1. Hormone replacement therapy and sex reassignment surgery to be government funded.

If someone donated enough money for me to get SRS, I would go for it in the blink of an eye.

Mary (transwoman, 20)

You have to realise that not every sistergirl can afford gender reassignment. It’s quite a lot of money.

Kooncha (Wallaga Lake, New South Wales)

Recommendation 2. GPs, psychiatrists, and endocrinologists are needed in the NT.

Yeah, a lot of them do eventually leave. Because of medical reasons. There is nothing here.

Sarah (transgender woman, 43)

I feel like there’s not enough resources here. And I’d be better off going to [southern capital city] for that.

Julia (transgender woman, 29)

Recommendation 3. Health professionals must be trained about trans issues by trans people.

There isn’t an endocrinologist, a psychologist, and a counsellor and medical practitioner that knows anything about trans people.

Nell (transwoman/intersex, 52)

They don’t actually know anything about gender diversity whatsoever, so they don’t have training, even organisations that should have training don’t.

Starlady (transfabulous, 38)

Recommendation 4. Health professionals are needed throughout the NT and not just in residential centres.

You can't just have your service in Darwin and expect the community to come and see you, you need to be going out there to those communities.

Starlady (transfabulous, 38)

There's hardly any doctors that help with admitting hormones and that's especially out bush.

Catherine (sistergirl, 30)

Recommendation 5. Health professionals must be committed to staying in the NT long term.

You've got to go through the whole life story again. And for someone who is going through that, it's just horrific. Always going back, restarting.

Sarah (transgender woman, 43)

Recommendation 6. Health services should be sensitive to Aboriginal cultures.

Hardly any doctors [who] deal with Sistergirls issues.

Catherine (sistergirl, 30)

Recommendation 7. Health resources must be available in Aboriginal languages.

They don't speak English very well, they are not going to go to a big city, they're not going to relocate to a big city where they don't know anyone.

Brianna (sistergirl, 32)

Recommendation 8. Innovative approaches must be employed during outreach to remote areas.

That sort of thing is what worked in Indigenous communities.

Starlady (transfabulous, 38)

We've been distributing USB sticks with interviews, showing the sistergirl documentary.

Brianna (sistergirl, 32)

Recommendation 9. Social support, including paid peer support, is needed throughout the NT.

I looked in the phone book and there doesn't appear to be anything. I've struggled to find any information for anyone up here.

Leah (transwoman, 52)

I need to be around others like me – queer, weird. I feel like a fish out of water around 'straights'. Isolation is a killer.

Hamilton (FtM, 37)

Recommendation 10. Suicide prevention programmes must be implemented immediately.

I was without hope and I was going to commit suicide, I attempted suicide and it did not work. Because someone pulled me off the edge of that, which I'm glad of that, I'm glad that happened coz now I'm actually getting stuff done.

Amelia (transwoman, 20)

We've had enough of what had happened to these girls who committed suicide.

Vivian (Tiwi Islands, Northern Territory)

Recommendation 11. Advocacy groups, e.g. Sisters & Brothers NT, must be government funded.

We don't get any funding, only donations to produce resources, educational resources to send out to communities.

Brianna (sistergirl, 32)

We've been working on it full time, I think we find it hard because there is a demand and a need for it but none of us are paid to do it.

Starlady (transfabulous, 38)

Recommendation 12. Indigenous communities need education on sister-girl and brotherboy history, issues, and human rights.

I see people suffer everywhere, right around the world, and I am suffering in Australia, land of opportunity. Where was human rights for me?

Crystal (sistergirl, 45)

My dad said to me: ‘I’m gonna take you out to the bush to take you down to the bush and shoot you in the head with a gun and leave you dead’.

Laura (Tiwi Islands, Northern Territory)

Recommendation 13. Future national trans research projects must include participants from the NT as well as sistergirls and brotherboys.

For 15 years now, we’ve been talking and talking, and we still haven’t been heard.

Jo Stott (Tiwi Islands, Northern Territory)

Conclusion

Despite the significant legal and public policy changes over the past few decades, transgender and sex/gender diverse Australians continue to face discrimination, loneliness, mental illness, violence, and suicide. This research has found that there are significant similarities between the issues affecting trans Territorians and trans Australians and while they share some difficulties, living in remote areas, such as the NT, also has a deleterious impact on trans people. Two of the most common issues are social isolation and lack of medical care, which are aggravated by the small population and large distances. For trans people, living in remote areas, even capital cities such as Darwin, can be more difficult than living in larger capital cities and urban areas. Therefore, social isolation and lack of medical care become push factors, pressuring people to leave places they call their home. This is especially problematic for Australia’s transgender First Peoples, for whom family, community, and place are essential to their sense of identity and their spirituality as well as their health and wellbeing. An Indigenous person who lives remotely and is facing transphobia may have fewer options than non-Indigenous people, not only because of the importance of their community, but also because English may be their third or fourth language, and sistergirls and brotherboys who relocate to larger cities, hoping to find solidarity within trans communities, often face racism instead. What appears to be concerning about these issues is they have generally gone unacknowledged by the Australian transgender literature. The recommendations noted earlier which pertain to sistergirls and brotherboys are very like those published in 1999 following the First National Indigenous Sister-girl Forum (Costello & Nannup, 1999). Similarly, Jo Stott notes: ‘We still haven’t been heard’. By bringing to the fore, once again, the issues facing trans Territorians and sistergirls and brotherboys, it is hoped that this book and the voices documented within it will help improve the lives of these

groups of people. Moreover, if governments, advocacy organisations, and individuals are able to bring to fruition some of the needs as articulated by those in this book, fewer will be forced to leave the NT. Trans Territorians and sistergirls and brotherboys have become displaced from their homes. The push factors of social isolation and lack of medical care have resulted in many people being forced to choose between their affirmed gender and their communities. Moreover, because many trans people leave, trans communities fail to form. Those who stay, especially those living in traditional Indigenous communities, risk ostracism, violence, and become susceptible to suicide. These difficulties are not just limited to trans Territorians, but they have wider implications for all trans people, in Australia and internationally, living outside of urban centres in remote areas.

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