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Transgenders and Intersexuals: Everything You Ever Wanted to Know but Couldn't Think of the Question

Lois May East Street Publications (2005) Paperback, 173 pp ISBN 1 921037 07 5

There are very few printed, published resources that attempt to faithfully document the trials and tribulations faced by transgendered and intersexed people in Australia. Fewer still (if any) focus on the history and stories of Queenslanders who are differently gendered. Brisbane writer Lois May's enthusiasm for her subject deserves recognition.

More a compilation than a single-author monograph, May is really acting in an editorial role rather than writer. May divides her book into three parts. Part one is a collection of autobiographical short-stories by transgendered and intersexed people. Part two is an exploration of the medical management of gender issues, with chapters from sexologist Milton Diamond, academic and health psychologist Greg Boyle and a transsexual person. Part three explores the human rights and legal aspects of gender difference. Throughout the three parts, personal accounts from transgenders and intersexuals take a prominent role, and these are interspersed with first person accounts from a range of professionals.

The book highlights the social impact of gender issues: the loneliness, isolation and despair that many transgenders and intersexuals face on a daily basis. Readers gain insights into the difficulties facing transgendered people living in a society often hostile to their identity, as well as the impact of society's unjust and unreasonable fear of gender difference.

May's dedication of an entire part to legal aspects is unique. While highlighting the important aspects of the ongoing legal struggles of transgenders, May also recognises that legal rights are just one aspect of life: although it offers some protection against public discrimination, the private lives of transgendered people are largely at the whim of the attitudes of those around them. Accounts from two officers from the Queensland Police Service are a surprising inclusion, and make interesting reading.

For clinicians working in the field of gender medicine, this book regrettably offers little. There is a reasonably thorough debunking of the attitudes and practices of a previous era, but little resonance with contemporary gender medicine practice. In this book, it is difficult to recognise those compassionate, skilled clinicians who try their best to do what they can to tease out the complex issues of gender identity, and smooth the path of gender transition. It is both irritating and disconcerting to see clinicians consistently

portrayed as shadowy, two-dimensional, menacing figures intent on undermining the identities of transgenders and intersexuals. Clinicians cannot ignore the mistakes of the past, but hopefully can apply those lessons constructively. One can only hope this book would not dissuade too many transgenders and intersexuals from seeking skilled medical services.

For the transgendered or intersexed reader, their families and friends, the book provides an easily readable dip into gender issues. There are too few transgender and intersexual voices in literature, and the prominence of first person accounts throughout the book's parts is an excellent concept. Unfortunately, some aspects limit its suitability for a widespread recommendation.

By assuming the mantle of editor, one accepts responsibility for sewing the disparate content and styles of different authors into a cohesive work. Editors must also be responsible for providing guidance on the technical and stylistic aspects of writing while preserving the unique voice of the writer. This is particularly important when not all contributors are professional writers. In these editorial aspects, the book fails to impress. Much of the impact of the personal stories is lost through clumsy writing. It is unfortunate that the potential impact of the personal stories in the book is dimmed by poor style, irritating punctuation, and lack of editorial intervention. Instead of being powerful, inspiring stories of triumph in the face of adversity, intimate self-discovery or sheer guts, the stories at times sound plaintive or histrionic. Those who have been brave enough to commit their life stories to the record deserve better.

Despite some problems, there is certainly an audience for this book, and clinicians with reasonable case-loads of transgender and intersexual clients will be able to make use of it. It is good to see the literature for transgendered clients expand: here's hoping for more additions to the literature in the future.

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Lesbian Health and Sexual Health: The Social Construction of Risk and Susceptibility

Kathleen A. Dolan Haworth Medical Press (2005) Paperback, 122 pp including index ISBN 0 7890 2479 9

Kathleen Dolan is an Assistant Professor of Sociology at North Georgia State University, USA. This book presents the findings of a study of HIV and STIs among lesbians that Dolan conducted during the late 1990s. It is an impressive study in its rigour, using high-quality mixed quantitative and qualitative methods, a well-integrated theoretical framework and findings that are well grounded in the data. She starts from a position that lesbians are at risk for STIs, providing evidence through a brief literature review. Her study provides valuable insights into perceived susceptibilities, actual risk factors and protective behaviours regarding STIs displayed by a diverse group of women having sex with women. She also briefly explores health-care practices and levels of disclosure of sexual orientation within health care.

The study

The title was the 'Lesbian sex project', and was advertised to women as a study of HIV and sexually transmitted diseases among lesbians. She recruited a community-based sample in one city in south-east USA through universities, lesbian and gay events and venues, a feminist bookstore, and women's organisations. A second group were recruited through snowballing of women who were contacts of the first group. She obtained 162 women who self-identified as being eligible for a 'lesbian' study. All women completed a 50-page survey, 70 of these participated in an in-depth interview, and another 24 participated in one of three focus groups. Women were aged 18 to 55 years, but only three (2%) were aged 46 to 55, whereas about half were 26 to 35 years old. Beyond age, the sample was more diverse than is commonly the case in community-based lesbian studies, with one-quarter of the women being black, almost half identifying as working or lower class and almost half earning less than \$20000 per year. The majority identified as lesbian (71%), 15% identified as bisexual, 7% as queer, 4% as other and 3% as straight. Just over half were single and 18% of the total sample had children. Around 80% had a history of sex with a man, and 23% had been diagnosed with at least one STI, both of which are consistent with comparable studies. However, 88% had had an HIV test, which seems unusually high.

The survey included information about demographics, sexual history including the use of protection, drug and alcohol history, and general knowledge of risk and protective factors for STIs. It also covered health-seeking behaviour, disclosure to health-care providers and treatment obtained. The interviews explored perceived susceptibility and risks,

more depth about knowledge and personal application of knowledge. One early focus group was used to develop the interview schedule, and two to verify study findings.

Findings and contribution to the field

Kathleen Dolan's in-depth exploration of women's sexual identity and behaviour is welcome. Numerous studies have shown that sexual identity, behaviour and attraction are often incongruent for women, more so than for men. This was a recent finding of the large 'Sex in Australia' study published in 2003; however, the meanings of this incongruence for women themselves cannot be adequately explored using survey-based methodologies. Dolan found that for these women, sexual identity was subjective, fluid over time and dynamic according to context. Identity labels were based on factors as diverse as who women had sex with, emotional attachments, stereotypes, the lack (or presence) of certain gender roles, choice or lack of choice, a political or an apolitical label and the need to be part of a group and/or separate from the mainstream. There were also pragmatic reasons for applying a label, such as the need to avoid stigma, therefore using 'lesbian' but being bisexual in behaviour. Complicating factors were a lack of consensus on the meaning of certain labels with, for example, some subgroups applying very strict definitions to the word lesbian, which were not adhered to by others.

Dolan explains lesbian-specific health risks and protective factors from both the individual perspective (using social constructionism) and the impact of membership of a defined group (using symbolic interactionism). She discovered three 'interpretive frames' of susceptibility in dealing with STI risk: women were either 'invulnerable', that is they accepted the lesbian cultural myth that lesbians don't get STIs; 'aware and protective', that is they knew the risks and used protective behaviours; or 'aware and not protective', these women had a 'high level of risk awareness but risk was not viewed as personally relevant' (page 98). There was some movement by individuals between frames, indicating a potential for change that would be amenable to health promotion. A fascinating focus-group exchange on safer sex demonstrated the huge variation in knowledge even among a small group of women. The lack of personal application of knowledge and the range of myths uncovered demonstrates a very specific area for targeted health promotion and the need for community-specific messages that somehow touch the individual consciousness.

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Limitations

The title of the project and the book as pertaining to lesbians is misleading, given the wide range of sexual identities described. Also, a substantial amount of the analysis involved discussion of fluid and varied sexual behaviours, which were not labelled as lesbian by participants. The references were largely USA-based and there was nothing dated after 2001, despite the book being published in 2005. This excluded a major body of work by Marrazzo published since then that confirms lesbian susceptibility to a range of STIs including herpes, BV and pregnancy risks.^{2,3} A large UK study of the sexual histories of over 1200 lesbians and bisexual women is a notable gap;⁴ as is a more recent study by Stevens of almost 1200 lesbians and bisexual women in San Francisco, which includes specific recommendations for nursing care.⁵

More importantly, I believe that a fourth interpretative frame is missing, one that I have seen repeatedly in my practice. This would involve women who are aware of their risks, but have no need for protection due to negotiated monogamy. It is possible that this gap resulted to some extent because over half of the women in the sample were younger and single. However, I am also concerned that the author tended to overlook positive lifestyle choices that result in safe unprotected sex.

Substance use and its link with risk behaviours and STIs was specifically addressed in the study. Unfortunately, neither mental health nor abuse was mentioned, both of which are also strongly associated risk factors for substance use and STIs.⁶ Finally, there was frustratingly little presented about health-care provider interactions, despite this being one of the central questions. Dolan provides a very cursory exploration

of the impact of various health-care provider attitudes and of disclosure, while focusing mainly on the lack of knowledge among health-care providers. She does claim that this is an issue unique to this population, therefore this deserves more attention. It is also one of the areas that would be most directly applicable to readers who are health-care providers seeking to understand how to improve their interactions with lesbian and bisexual women.

References

- 1 Smith A, Rissel C, Richters J, Grulich A, de Visser R. Sex in australia: sexual identity, sexual attraction and sexual experience among a representative sample of adults. *Aust NZ J of Public Health* 2003; 27: 138–45.
- 2 Marrazzo JM. Barriers to infectious disease care among lesbians. Emerg Infect Dis 2004; 10(11): 1974–8.
- 3 Marrazzo JM, Stine K. Reproductive health history of lesbians: implications for care. *Am J Obstet Gynecol* 2004; 190(5): 1298–1304.
- 4 Bailey JV, Farquhar C, Owen C, Whittaker D. Sexual behaviour of lesbians and bisexual women. *Sex Transm Infect* 2003; 79(2): 147–150.
- 5 Stevens P, Hall J. Sexuality and safer sex: the issues for lesbians and bisexual women. J Obstet Gynecol Neonatal Nurs 2001; 30(4): 439–47.
- 6 Warner J, McKeown E, Griffin M, Johnson K, Ramsay A, Cort C et al. Rates and predictors of mental illness in gay men, lesbians and bisexual men and women: results from a survey based in England and Wales. Br J Psychiatry 2004; 185: 479–85.

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Current Research on Bisexuality

Ronald C. Fox (Editor) Harrington Park Press 280 pp ISBN 1-56023-288-9 Co-published as *Journal of Bisexuality* 2004; 4(1/2).

Current Research on Bisexuality is a collection of papers, rather than chapters, written on a range of issues about bisexuality, including bisexual identity development, bisexual married women and their spouses, friendships between bisexual and heterosexual women and attitudes towards bisexuality. The papers are written in journal article style and are co-published in the *Journal of Bisexuality* 2004; 4(1/2). The authors are researchers and clinicians, many of whom are accomplished scholars in the subject area.

The breadth of issues and interesting topics addressed in the papers ensure that the reader can dip in and out of this book. For those who prefer to read from cover to cover, the papers that appear in the first half of the book are in logical order. From Mary Bradford's fascinating qualitative study about the development of bisexual identity through to Kirsten McLean's insightful Australian-based research on how bisexual men and women in regular relationships negotiate and accommodate sex with partners outside the relationship, the reader is provided with much more than a glimpse of the lives of bisexual people. The papers in the second half of the book are slightly more eclectic in focus but are no less interesting and important. J. Fuji Collins conducts a much-needed review of the literature on ethnicity and bisexuality, with some important insights for further research.

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Israel and Mohr provide a thoroughly absorbing commentary on the research into attitudes towards bisexual men and women and Emily Page relates some startling and somewhat disturbing stories about the experiences of bisexual men and women in the care of mental health services.

One of the rewards of reading the book in its entirety is that it provides a rather rich overview of the current state of research and thinking on the subject of bisexuality. The editor Ronald Fox, in the 'Introduction', sets the tone of the book by providing an historical summary of theory and research on bisexuality. He identifies two major shifts in thinking about sexuality that have led to a more accurate understanding of homosexuality and bisexuality. The first was the shift away from the 'illness' model, which regarded samesex attraction as a sickness requiring treatment. The second was the shift away from the dichotomous view of sexual orientation, which positioned sexuality as either heterosexual or homosexual and essentially omitted bisexuality. Both these ways of thinking about bisexuality, however, are still evident throughout the book in some of the responses of the non-bisexual study participants, indicating an interesting disjunction between the current thinking of researchers and bisexual people about bisexuality, and current attitudes of the broader community. There are many examples in the book of negative attitudes towards bisexuality among nonbisexual people. Israel and Mohr's synthesis of the 'attitude' literature suggests that negative attitudes subsist mostly around the belief that bisexuality is a transitional stage in sexual development and that bisexuals are really lesbian or gay individuals in denial of their true sexual orientation. The book really excels in exposing as misguided some of these common myths, attitudes and stereotypes about bisexuality. One stereotype is the notion that bisexual people cannot be satisfied by monogamous relationships. In Kirsten McLean's research on 60 bisexual men and women living in Australia, people reported a range of types of relationship. Many were happily in monogamous relationships while many were in 'open' relationships.

The extent to which negative attitudes about bisexuality appear in the papers is interesting in the light of the results of two studies by Robin Hoburg and colleagues on the prevalence of bisexual feelings and thoughts among heterosexual college students in the USA. The studies found that about 30% of the women and about 15% of the men reported having had sexual feelings for both the same and the opposite sex.

For me, the most interesting elements of the book were the stories of the lived experiences of bisexual people. These stories tended to focus on the difficulties of forming and maintaining a bisexual identity. We are told in Mary Bradford's qualitative study that the process of forming a bisexual identity was generally long and arduous, with cultural attitudes affecting people's ability to make sense of their attraction to both men and women. Another persistent condition that bisexual people endured was the sense that their bisexual identity was largely invisible, summed up by a woman in Bradford's study in this way: "...If I was in a relationship with a man, everybody assumed I was straight. If I was in a relationship with a woman, everybody assumed I was a lesbian" (p. 14). In the study by Galupo and colleagues we learn that the heterosexual women friends of bisexual women were more likely to seek similarities in the friendship, such as their mutual attraction to men, and play down or even deny their friend's same-sex attraction. We also learn from Emily Page's research that some mental health practitioners continue to apply the illness model in striving to link patients' mental health problems with their sexuality. And, in Amity Buxton's study of mixed-orientation married couples, it was shown that many of the bisexual wives felt part of, yet rejected by, both the gay and straight worlds. Indeed, this latter point emerged in a number of papers in the book in relation to both bisexual men and women.

Where the book may fail slightly is that it does not give a sufficiently explicit critique of the different ways in which bisexuality is constructed. However, this is probably unfair criticism, because the book does not set out to do this. Another slight limitation of the book is its focus on the difficult and perhaps negative aspects of a bisexual identity. There is definitely scope for more research and for stories about the positive aspects of bisexuality and, to be fair, there is an acknowledgement in the book to this effect.

I enjoyed reading this book and see it as a valuable addition to the literature on sexuality, and bisexuality in particular. Though not heavily theoretical, the papers contribute to both theory and practice. They would appeal to researchers, those who work in the field of sexuality and those who have an interest in bisexuality. The last paper by Ronald Fox provides an extensive list of journal articles, books and theses that have been written on the topic of bisexuality, which is an excellent resource in itself.

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