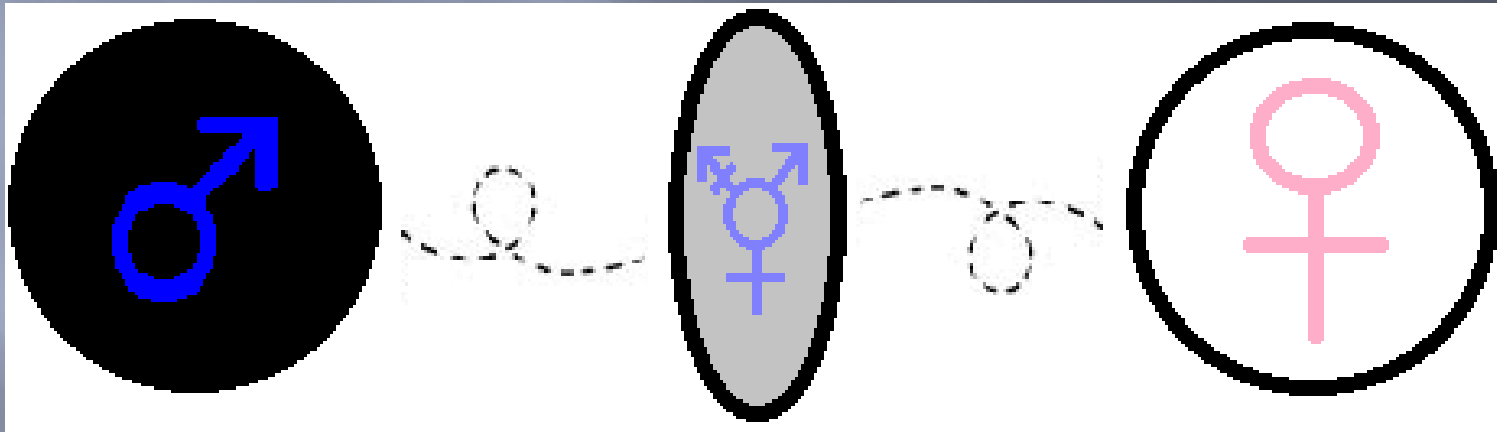


THE OTHER SIDES OF THE COIN:



BREAKING THE GENDER BINARY

Introductions



Andrew Leigh-Bullard



Luke Wolford



Kelly Roberts

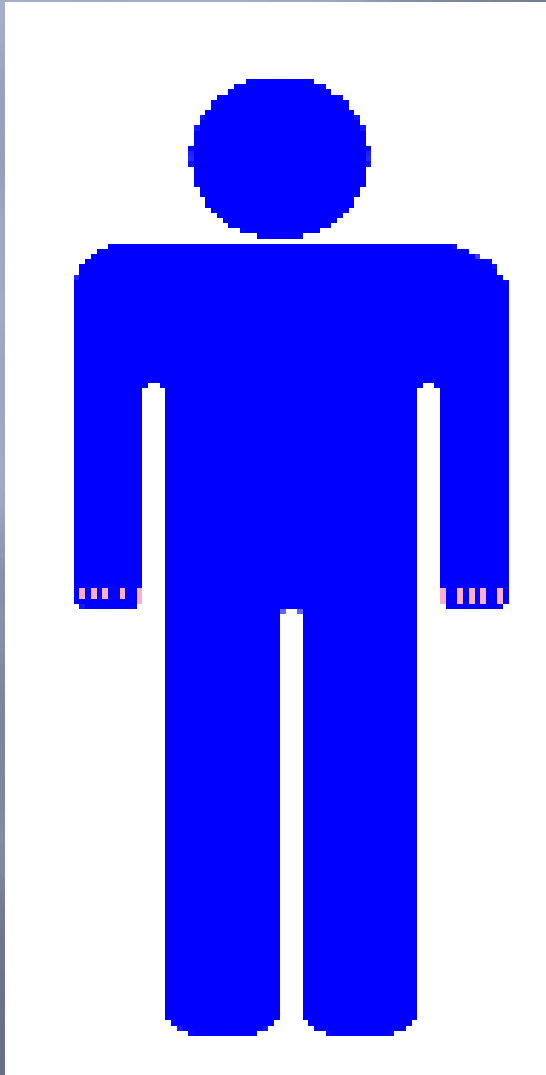
Goals of the Workshop

- ▣ Empathy & Understanding
- ▣ Consequences of Socialization
- ▣ Tools and Resources

Disclaimers



Activity



Discussion

- ▣ How did that make you feel?
- ▣ How was your activity presented?
- ▣ Would you have chosen this activity on your own?

Looking at the Coin:



Sex: The Physical Form

Defining Characteristics:



XY



XX

Testosterone



Estrogen

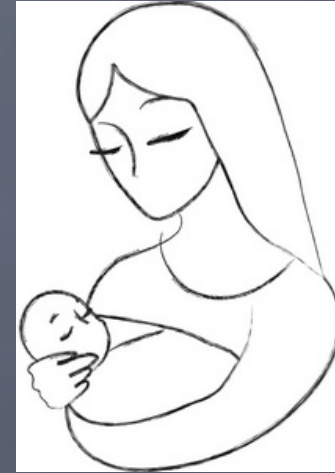
Penis/Testes



Vagina/Breasts

Types of Sex:

Assigned Sex



Sex Identity

Current Sex



Gender: Identity & Society

Defining Characteristics:



MAN



WOMAN

Types of Gender:

Assigned Gender

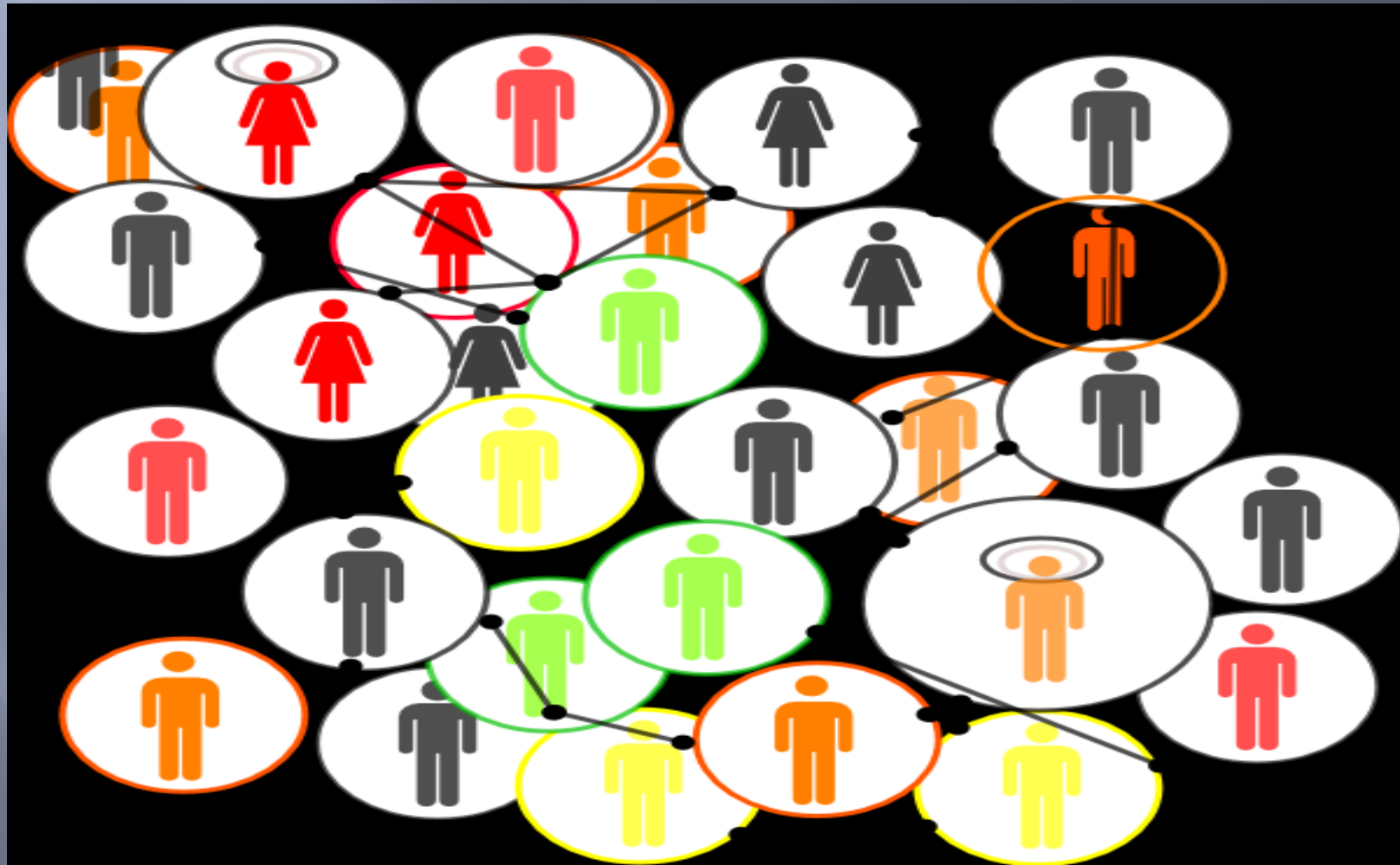


Gender Identity



Current Gender Presentation

Challenges of Transition: Social



Challenges of Transition: Legal



STATE OF KANSAS
DEPARTMENT OF HEALTH
CERTIFICATE OF LIVE BIRTH

1. Child's First Name (Last of parent) 2. Child's Name 3. Sex (Male) 4. Sex (Female)

5. Date of Birth (Month, Day, Year) 6. Time of Birth (Hour, Minute) 7. Place of Birth (City, State, Country) 8. Place of Birth (County, State, Country)

9. Name of Hospital or Institution (If not in hospital, give street address) 10. Name of Doctor (If not in hospital, give street address)

11. Name of Physician (If not in hospital, give street address) 12. Name of Physician (If not in hospital, give street address)

13. Name of Nurse (If not in hospital, give street address) 14. Name of Nurse (If not in hospital, give street address)

15. Age of Father (If not in hospital, give street address) 16. Age of Mother (If not in hospital, give street address)

17. Age of Mother (If not in hospital, give street address) 18. Age of Mother (If not in hospital, give street address)

19. Age of Mother (If not in hospital, give street address) 20. Age of Mother (If not in hospital, give street address)



Registration Acknowledgment Card

SOCIAL SECURITY NUMBER: 12345678
DATE OF BIRTH: 08-25-92

Home and Current Mailing Address:
OSWEGO, NY 13126

SIGNATURE OF REGISTRANT:
William A. Chatfield



Challenges of Transition: Medical



Challenges of Transition: Society

Are you male or female?



Male



Female



EXECUTIVE SUMMARY

Injustice at Every Turn

A Report of the National Transgender Discrimination Survey

13th Annual Transgender Day of Remembrance

November 20, 2011



Those who cannot remember the past are doomed to repeat it.

<http://www.transgenderdor.org>

~George Santayana

There is HOPE!



How YOU can help!

- ▣ The Golden Rule
- ▣ Be Inclusive
- ▣ Role Model Acceptance
- ▣ Share & Learn

Questions

