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Having a change of Hartwell

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Having a change of Hartwell

Transgendered student addresses SRS misconceptions

I have recently become aware of an article published in the April 7th issue of *The Maine Campus*. In it, the author, Mike Hartwell, makes several incorrect assumptions. This is understandable, as he never consulted me prior to writing or publishing the article. Given this, I would like to take a few moments to set the record straight.

First, it is true that I am being charged more to live here than others; I am being charged slightly more than double the typical rent for a person in my program, adding up to an extra \$2,500 over the course of seven months. Even if I found a person willing to live with me, I am barred from having a roommate. This extra rent has resulted in a total of six voided paychecks, five of which were consecutive. Without Songs for Change or similar assistance, I would have run out of funds months ago.

Not only is Disney charging me extra rent, I have also been denied training in an entire line of business otherwise typical of my role, severely restricted in bathroom use, and required to walk well over five times the normal distance to change my work clothes. Changing my work clothes on the clock, it should be noted, is a necessary function of my role. My goal in this internship is to help the Disney Corporation, and its subsidiaries, address this unfortunate situation which they did create, and join Xerox, Apple Computers, Walgreens, Bank

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One, HP, Intel, IBM, Eastman Kodak, Capital One, Aetna, American Airlines and many more companies in preventing any similarly unfortunate situations in the future.

I'm certain that Hartwell is a wonderful columnist; however, it may make more sense to seek a more professional source when defining medical conditions. The Harry Benjamin International Gender Dysphoria Association — <http://www.hbigda.org/> — an internationally recognized group of professionals who create and maintain the standards of care for persons with Gender Identity Disorder define transsexualism as having three distinct criteria: The desire to live and be accepted as a member of the opposite sex, usually accompanied by the wish to make his or her body as congruent as possible with the preferred sex through surgery and hormone treatment; The persistent presence of transsexual identity for at least two years; and the uniqueness of the disorder is not a symptom of another mental disorder or a chromosomal abnormality. It should be noted that there are other types of GID, but these are beyond the scope of this discussion.

To qualify as a mental disorder, a behavioral pattern must result in a significant adaptive disadvan-

tage to the person or cause personal mental suffering. GID does both of these things. Though it is not directly life-threatening, denying treatment or insurance coverage to persons working through this disorder would be comparable to withholding similar assistance from persons with anything from bipolar disorder to suicidal depression. It is estimated that GID appears in less than 0.25 percent of the population. Providing needed medical treatments to a population of that size simply does not compare to the scores of fraudulent insurance claims which occur every year.

Further, we have been learning more about transsexualism every year. Studies such as the one found here — <http://www.symposium.com/ijt/ijtc0106.htm> — as well as others, indicate that there is a biological cause for GID, putting the lie to prior studies involving questionable research methodologies.

Even given all of these inaccuracies, I must thank Hartwell for using the proper pronouns along with my correct legal name, Claire. Transsexuals are neither monsters nor perverts. We are a population in need of assistance and understanding. We make some of the most difficult personal decisions conceivable, risking the loss of family, friends, spouses, children, our livelihoods, our dignity and even sometimes our lives.

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