





Life as a woman trapped in a man's body was hell for Mark – until he became Trayci

It's a tragic story, the story of Mark. Mark, who at the age of five already knew that he wanted to be a girl. Mark, the child whose father shot himself just four days before his twelfth birthday. Mark, the young man who dated girls, rode competitive moto-cross and leaped from aeroplanes to prove his manliness. And Mark, who every day secretly wished his penis away.

But it's also the story of Trayci, born at the age of 31 with a brand-new surgically created vagina. Trayci, who within months started working as a prostitute. And Trayci, who showed that we should never take anything for granted, by taking a female lover as soon as she was well enough to do so.

This story poses many questions and not enough answers, but here it is the story of Trayci, the woman who nearly is, and Mark, the man who never really was...

"I suppose," says Tracyi, "I was always a transsexual, but never a cross-dresser. I went through the thing of thinking I was just gay, but I never had any sexual experience or sexual interaction." Trayci tells me this while we drink coffee in the lounge of the Durban flat she shares with friends.

"I went through this dilemma - I was different, and I couldn't let anybody know for fear of whatever retribution. I didn't know whether I'd be outcast from society, from my friends. I thought to myself, maybe I was just gay."

But a single experimental sojourn into gay sex when he was about 19 was enough to convince him that this was not for him. For years afterwards Mark remained celibate, but one thing never changed. He hated his penis.

During his national service Mark was sent for psychological evaluation after he'd gone AWOL from the SADF's crack motorcycle unit. There the army found out his secret and responded in a totally unexpected way. They offered him sex-change surgery at 1 Military Hospital in Pretoria, but with conditions that were totally unacceptable to Mark. He declined. We can but marvel at the irony of it. "Send your son to us and

made me 'safe' for them to reveal their secret to," Trayci tells me tonelessly, "and when I saw him dressed up I thought, My God – I'm not doing this. I did not relate to what he was doing at all. He looked absolutely hideous."

Mark went away bearing two secrets instead of one and, as he didn't know the difference between transvestites and transsexuals, feeling more confused than ever.

"Because transvestites and transsexuals were always mentioned together, I'd always believed they were the same thing. Suddenly I knew I wasn't a transvestite. It left me confused for a long time."

Mark then confided in a private



we'll make a man of him. Of course, if that doesn't work, there's always plan B..."

Trayci tells me how Mark went to see his mother, and sitting there in her home, dressed in military fatigues and combat boots, told her that he was a transsexual and wanted to have sexchange surgery. What followed was extraordinary. His mother told him that his step-father was a transvestite who derived great satisfaction from wearing women's clothes.

"My declared transsexuality suddenly

doctor who put him on daily doses of the female hormone, oestrogen. The next milestone in Mark's search for his sexuality came when, to his surprise, he found himself a girlfriend.

"We ended up sleeping together - she was a friend and flatmate, she knew my whole dilemma - totally out of the blue, after sharing a single bed for three months with no sexual interaction whatsoever. Straight afterwards I flushed all my hormones down the loo. I felt this was my chance."

But although it lingered for four

TRANSSEXUAL TRANSMOGRIFICATION

years, the relationship was far from what one would expect it to be between two young healthy adults.

"We were very committed to each other emotionally, but sexually it fell apart. I simply couldn't perform."

So Mark resorted to medical science

then living in 1989, Mark told her that he wanted out - he was going for the operation. "And that was the end of the relationship for her."

Mark came back to South Africa for the next few years, working for a while as an instructor at an adventure school and environmental education centre in the Drakensberg, taking groups kayaking, hiking and mountainclimbing. But no matter how hard he tried, he couldn't fool himself.

In February 1992 he returned to London, feeling absolutely helpless.

Then in 1993 Mark took the first irreversible step towards becoming a woman, or rather, less of a man. He decided to have a bilateral orchidectomy.

"Testicles are very central to the male identity. I decided to remove them and see what my response would be. I knew this move would leave me visually uchanged, but I'd have emasculated myself. I made the deci-



again, seeking treatment from a urologist who gave him a course of expensive injections for him to administer to the base of his penis. Although they didn't work they gave him more grounds for thought.

"When I was younger my masturbation process was warped - I never masturbated, but at times I wanted to cut my penis off. I'd try with a breadknife, for example, without even causing a scratch, but it was very painful. As I grew older I got more serious about it, but it was still too sore for me to carry it through. With the injections I learned that if you injected into the side it was painless - you can actually slowly push that needle into the side of your penis and feel nothing at all. This rekindled the thing of chopping off my penis."

The relationship finally died when Mark's transsexuality started becoming more insistent.

"She wanted to sleep with me and I had got to the point where I said - and felt very perverse in doing so - that I didn't want her to touch me, and if she did she could only do it as if I was a woman. It was terribly traumatic for her. At times she was so frustrated that she became violent. She would try to beat me."

Finally, in London where they were

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sion to take the brakes off and stop adjusting my behaviour".

Although told by doctors that the operation would remove any lingering libido that he might have, Mark was surprised to discover this was not so.

"What happened is that my sexuality blossomed. For the very first time in my life I masturbated, *after* my testes were removed."

By this time Mark was working for a large public company, and although he had arrived there in a suit and tie as Mark, he soon slipped into the role of Trayci.

The staff in the office knew what was happening and were fully supportive. Mike, the manager, a married man with a young daughter, offered more than most.

Early in 1995 he became Trayci's first real lover. In a sense, he took her virginity.

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"Mike was into S&M, so I also suddenly had that thrown at me, which I didn't relate to very well because although I was twenty-nine I was still the sexual equivalent of a thirteen-year-old. But I discovered a sensuality I never knew I had. It was wonderful to just completely let go. For the first time I was completely indulging. And orgasming, but with my knickers on. I never took them off with Mike, in spite of his assurances that he had absolutely no problem with my penis."

A few months later Trayci returned to South Africa, and on July 9, 1995 went under the knife. Two months later she went back to London and worked for a short while before breaking up with Mike and coming home yet again. And there her life took another bizarre turn.

When she returned to London after

the operation she'd bought a pornographic magazine to compare notes between her surgeon's handiwork and the real thing.

"I wanted to see how close I was, but looking at the porn magazine I became fascinated by the

whole thing of prostitutes and porn stars, and how on earth they could do that. Then, back in Durban, I met a prostitute, and the fascination was heightened."

The fascination expanded. The prostitute was a lesbian, and the two soon became lovers. Trayci's sexuality may have blossomed late, but it blossomed vigorously. Once she'd got past the emotional excitement of the new experience, she did not find lesbian sex that big a turn on.

"It was just another experiment - something I had to try."

Trayci's sexual experimentation was not limited to her lesbian affair, however. "I'd wanted to talk to a prostitute, but by answering my questions she raised more questions. Nothing could answer them, so I ended up going to an agency with her and trying it out. I sort of got sucked into it for a month or two."

During that time she worked in Durban and Johannesburg, making up to R350 for 15 grubby minutes, and learning a lot about men in the process. "A lot of men actually like sex-changes. There's quite a demand for them. But a lot of it is on the novelty level."

How does Trayci see herself now? Does she enjoy full heterosexual intercourse with a male?

"I didn't know where my sexuality was going to lead me. I didn't know, when my penis was cut off, how I would handle it. I mean, I've had a lifetime with this damned thing, so how would I respond when some guy comes at me with one? But it was a spontaneous thing, and I was very pleasantly surprised.

"When I did not have an abnormal response I felt there was even more chance of my having a normal life, instead of being a lesbian transsexual, which is a very common thing."



THE INS AND OUTS OF SEX-CHANGE SURGERY

The testicles are usually removed from the scrotum, which is left attached, but in Trayci's case this was not necessary. The penis is then "degloved" – ie it's amputated but the outer skin and urethra are retained.

Next a cavity is created in the groin and lined with the inverted penis skin to form a uterus. The urethra, the canal that transports urine from the bladder out of the body, is then reduced to female proportions, pulled through an incision in the penile skin and sutured to the surrounding tissue. Some of the skin of the scrotum is used to form a labia. In most cases the resultant "vagina" is inadequate in that a depth of nine to 10cm is all that can be expected, so Trayci's surgeon also carried out a procedure called *rectosigmoid vaginoplasty* — a portion of the sigmoid colon is moved down.

with its blood supply, to further line the new vagina. (The sigmoid colon is the S-shaped section of the large intestine just before the rectum.)

Recovery is slow and painful. The patient has to dilate the neovagina daily, which takes around 15 minutes and is often extremely painful – most sex-changes use a vibrator for this task. Later on, if regular intercourse takes place, dilation can be performed less often or even discontinued.

The patient will also probably require breast augmentation surgery, and electrolysis to remove body hair.

Trayci's operation was carried out at Addington Hospital in Durban and was paid for by the State. As a private patient in the United Kingdom she would have paid pounds £ 7 000 (R45 000).

TRANSVESTITES VS TRANSSEXUALS

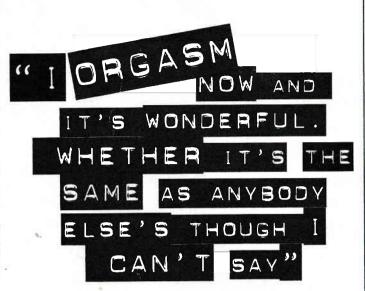
Transsexuals believe they're trapped in a body of the wrong gender. Their gender identity, or sense of their own masculinity or femininity, is in conflict with their actual physical sex.

The psychological implications are immense, and transsexuals frequently suffer from anxiety and depression.

Transvestites are almost always men and enjoy adopting a female role, often wearing women's clothing and taking a female;

name. But a transvestite still feels himself to be a man, and a large proportion of them are heterosexual.

Transvestism may involve occasional cross-dressing while alone in private, often leading to masturbation. It can also involve wearing single items of feminine underwear beneath everyday clothes, or even venturing out in public wearing full female regalia for the thrill of it.



What about orgasms? Does she orgasm as a female, having failed so lamentably as a man? "Orgasms are something that you're primed about beforehand, that there's a strong possibility that you will have no sensation whatsoever. But you don't have the op for sex. It's for life – you have it for life. Sex is a part of life, but before I had my op I was quite willing to have no sex, so I could have a body that was me, that I could interact with, be happy with.

"But yes, I orgasm now and it's wonderful. Whether it's the same as anybody else's though I can't say."

Trayci comments wryly that she could be categorised as pan-sexual. "I've slept with both men and women, as a man and a woman, so I suppose that qualifies me."

I point out that she's yet to sleep with a sex-change, and that tickles.

"No I haven't done that yet. It's a terrible thing to say, but I have no inclination to sleep with a male-to-female transsexual. It's an indictment of my own opinion of myself and what I expect others to think of me."

I ask Trayci if she's happy now that she's a woman. She tells me she is. 'She considered her life a confused mess before surgery, but that's changing. Best of all there's no penis to haunt her.

"People said I wouldd have a ghost penis, like an amputee, but I can truly say that I don't remember what it was like to ever have one."

But Trayci still encounters hostility, and surprisingly, it often comes from women.

"Women seem to feel that their femininity is slightly threatened by me, and they're not going to recognise me as a woman. I'm not ever going to be an unconditional member of that exclusive club. I'm only ever going to be amember on invitation, when it's extended occasionally. But I'm no longer a part of male society whatsoever, and that for me is fun. I hated being a man."

The worst of it should be over now.

The boy who had pin-ups covering his bedroom walls, not to drool over, but so that he could study how girls sat, stood and walked, no longer has to pretend. He no longer needs to practice in secret in front of a mirror.

But the woman working as a waitress in Durban, will she ever be happy? God alone knows. Gavin Foster

