

Ganda ng Transpinays: Narratives on Trans Health, Barriers to Care and Trans Sisterhood in the Philippines

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Transpinay is one of the more current terms to denote the identities of trans women in the Philippines. The term was introduced by STRAP, The Society of Transsexual Women of the Philippines, which has been around since 2002. Being the first and oldest existing trans organization in the Philippines, STRAP members have collectively shaped narratives that structure the experience of transpinays; for example, in terms of life development, integration into society, obstacles and prejudices, and the meaning of transition. Although this term was not often used in the Philippines until the early 2000s, there has been an ongoing tradition of transpinay communities supporting steps toward physical transition. The use of hormones and silicone injections and optional surgical procedures are often learned from other transpinays, mostly in the trans pageantry and local beauty salons. Those salons predominantly employ transpinays and gay men.

The absence of a gender recognition law, same-sex union law, anti-discrimination law and apparent exclusion in reproductive health law among others, are some of the reasons why transpinays refrain from accessing formal healthcare. They rather consult with each other, especially concerning questions about transitioning.

The dominant catholic culture brought to the Philippines by missionaries during the Spanish colonial years contributed to the erasure of pre-colonial gender non-normative identities, such as the babaylans and the catalonans¹.

¹ Babaylans and catalonans are among the pre-colonial identities normative to varying regions of the Philippines. They share some similarities with pre-colonial Hijars of South Asia or Berdache of North America.

Colonization sets the context for the barriers to integration faced by trans people in the Philippines today.

This chapter provides a narrative of transpinays and some experiences of transpinoys (Philippine trans men). It shows how they navigate a conservative, traditional and politically divided Christian society on their journey to openly live their authentic selves. This chapter also explores the barriers trans people experience when transitioning and when accessing healthcare.

Most of all, I aim to account for how transpinays (and some transpinoys) manage to remain vibrantly visible in a society that is, paradoxically, both tolerant and unaccepting. I argue that sorority and fraternity among trans people is key to survival and to finding themselves when they get lost in transition.

Introduction

Prior to colonization, there were a number of significant gender-variant identities in the Philippines (Alegre 2013:15ff). These identities are the babaylans, the catalonans and the asogs, among others, which existed across indigenous groups in different provinces of the Philippines.

Filipinos were animists or pagans long before Christianity was introduced (Alegre 2013:15ff; Brewer 1999:14ff; Johnson 1997:25ff). The aforementioned identities were treated with respect and veneration similar to the hijras of South Asia or berdache of North America (Nanda 1998:xix; Roscoe 2016:9ff.). Their roles in our early society were like shamans or high priests, even community leaders. Since the Spanish colonization, those early identities were repressed and only preserved through oral history (Brewer 1999:14ff).

The Philippines has become a predominantly catholic country, yet it appears to be relatively tolerant towards LGBTIQ people (PEW Research Centre 2013). In current media and pop culture, LGBTIQ people are visible. One of the most renowned celebrities and entertainers in the country is Jose Visceral, known to most as Vice Ganda (Pamittan et al. 2017:95ff). Vice describes himself using the Tagalog term *bakla*, which means that he is a gay man, who also cross-dresses and shows gender expressions of a feminine or androgynous kind (ABS CBN News 2018). Another Tagalog word, *ganda*, which means 'beautiful', is likewise widely used by Filipinos who were assigned male at birth and identify as gay men, non-binary men, drag queens, cross-dressers and trans women. Perhaps the two most prominent *bakla*-identified people in

the Philippines in the past decade would be Vice Ganda and Jennifer Laude, a trans woman who was murdered by a US marine in 2014. These two *gandas* have different narratives and perhaps even different ways of self-identification. They represent two different faces of trans experience in the Philippines.

There is no gender recognition law in the Philippines. There is also no same-sex union or marriage. The national SOGIE (sexual orientation, gender identities and expressions) Equality Bill, which was passed in August of 2019, was highly controversial, sparking weeks of debates and online discussions across the Philippines. At the height of this public discussion, a transpinay named Gretchen was disallowed from using the women's toilet in a mall in Quezon City. Gretchen incidentally was live on Facebook recording this event. She was publicly humiliated and embarrassed by how she was treated (Merez 2019).

The intervention of transpinay Congresswoman Geraldine Roman, as well as the cis allies senator Rissa Hontiveros and the mayor of Quezon City, Joy Belmonte, shifted the national debate on the SOGIE Equality Bill, an anti-discrimination ordinance which had been debated in various forms for twenty years (Talabong 2019). Most churches in the Philippines argued that such a law which 'tolerates' the LGBTIQ lifestyle should not be enacted. Nonetheless, the law was successfully passed in August 2019.

During these public debates, transphobic attitudes towards trans people using bathrooms according to their gender identity were widespread. Shockingly, many members of the LGBTIQ community either remained silent or showed no support for the enactment of the SOGIE Equality Bill. Some even rejected the bill, stating that LGBTIQ people, in general, should strive to blend in with the cis- and heteronormative lifestyle and should be grateful for being included.

Diane and Pilar: Hormone Use for Gender Affirmation Among Transpinays

The narratives and themes presented here draw on my graduate research which was conducted in the 2000s. I interviewed, observed and surveyed transpinays, hoping to understand many aspects of our identities, expressions and experiences.

Some experiences described by transpinays in my research project show the barriers to accessing hormone therapy:

"I don't know about medical supervision and it is scary because they might subject you to various laboratory tests. Plus, nobody told us about the word 'transitioning', we just know about hormones and the optional surgeries. Bottom line, if we can get it over the counter why go to the doctor?" – Trisha.

"Doctors are expensive, even more expensive than that box of pills. Why waste your money further?" – Ali.

"I was discouraged by a male doctor saying it is wrong and immoral to change my body as it is the temple of the Holy Spirit, of God. It violates God's rules on our creation. Since then, I realized I shouldn't consult a doctor on my hormone use, they just might stop me." – Frida.

Hormone intake has been known and widely spread amongst beauty pageants since the 1990s and gender-affirming surgeries have become more popular since the beginning of the 2000s. Among transpinays, when one talks about hormones, most would think of orally taken estrogen and/or progesterone. Mostly they were not aware, at least until the early 2000s, of the existence of patches and lotion gels and even now, seldom use intramuscular (IM) or injectable hormones.

Hormone therapy is not usually viewed in the Philippines as a component of medical transition that should be medically supervised (Alegre 2013). Rather, transpinays learned through parlor shop-talk and backstage chats at beauty pageants that the most feminine and beautiful among them were taking hormones on their own.

I, as a transpinay, could also relate to them. My interviews with transpinays and *baklas* showed a strong consensus within these communities that: (a) medical fees are expensive and there are administrative fees even for public hospitals, which have queues that last for hours; (b) Christian or catholic trained and raised doctors often invoke their religious beliefs to harass and discourage patients; and (c) it is not widely known that hormone use could be part of a transition package that is medically supervised.

Transpinays' unsupervised use of hormone medication reflects the broader prevalence of self-medication culture in the Philippines. One interviewee, Trisha, reported: "We self-medicate all the time, we use over the counter remedies and just ask the pharmacies what are alternatives and better doses to which they respond."

Although in recent years the local pharmacies have become stricter with over-the-counter drugs, self-medicating in consultation with pharmacists remains prevalent among Filipinos. Many medicines are endorsed by local celebrities. It is only more recently that concerns about liver and kidney damage due to over-medication are being addressed. The country has a long history with quack doctors, local herbologists and belief in the supernatural including witchcraft and voodoo. This cultural context may have some influence on the attitudes of transpinays today. There is also no medical benefit for the general public in the country comparable to the NHS of the UK or systems in Canada, US, Australia and EU. Hence many choose to take cheaper brands of hormones without understanding their varying effects and side effects. They may ingest oral contraceptives, estrogens or anti-androgens without necessarily knowing the difference. Further, intake and dosage of hormones varies considerably. Hormones are sometimes popped in like sweets:

“The more the merrier, hahaha, we just thought the more you take the faster your transformation will be. We just experience more headaches and tiredness, yet we feel more transformed. Although years later I realized, it's not the case, I still had to undergo top surgery for breasts...” – Frida.

The expectation that each hormone tablet contributes to feminization leads many transpinays to take very high doses. The more expensive the drugs are the less they take. The cheaper it is, or if it is freely available, the consumption increases. Cis women in some communities in the Philippines are given free access to oral contraceptive hormones and will sometimes provide these directly to their transpinay friends. Reproductive health is not well-practiced and lacks safe implementation in the Philippines since the church criticizes the principles of contraception and family planning (Alegre 2013). Therefore, many cis women pretend that they will take these pills and secretly give them to their transpinay friends.

Quick Change: Fillers and Silicone Injections

In contrast to expensive medically supervised and performed gender-affirming surgeries, since the mid-2000s, transpinays have learned about cheaper medical-grade fillers and silicone injections (Alegre 2013). Once more, most of this knowledge has been gained and spread throughout the pageant and parlor circles. Individuals who wish to undergo these procedures may look

for someone amongst their peers who has experience injecting fillers and silicone, or they may learn to inject these themselves. The following quotes reflect some of the barriers to medically supervised procedures and attitudes toward these unofficial alternatives:

“Women have these fuller face or higher cheekbones, more pointed chins and wider, fluffier hips and butts, and fillers and silicone injections are the only solution here. I will not do those surgeries, they’re so expensive and scary.” – Manda.

“We met this girl who said she was trained as a nurse but could not afford to finish school and so she dropped out and became an aesthetician’s assistant. She then became our supplier for fillers and silicone and she would come over to inject our faces, breasts and hips and butts.” – Tasha.

It is unknown where this trend of fillers and silicone injections has started. Similar trends can be found amongst some communities of *travesties* in South America and amongst trans communities in South Korea and Thailand. It may be that transpinays have gained some knowledge about this practice overseas and introduced it to the local Philippine context.

Over time, the local community has used the expressions *chuk* and *tusha* to refer to injectable enhancers. This practice has become so prevalent that several widely viewed television programs have featured stories about these practices ‘gone wrong’. Transpinays featured in these stories had some common life experiences. Many of them were poor, most worked for beauty parlors, some were beauty pageant contestants. All of them had the wish of appearing prettier and more feminine. They accessed these medically unsupervised treatments through their communities and weeks or months they suffered from side effects. Their faces showed bruises and lumps. The enhanced areas sagged and swelling never subsided (GMA 2017). The TV programs researching the stories worked together with medical doctors to reveal that many of these transpinays had been injected with industrial-grade silicon, which belongs in the automotive industry and should never be used for any type of body modification. These stories went viral and, as a result, medically approved fillers are becoming more popular. At the same time, some transpinays still use industrial silicone if they cannot afford more expensive fillers. Many of these transpinays are aware of the negative side effects, and that these could even be fatal, but will take the risk if it is the only option available to them. One transpinay beauty queen was famously quoted as saying:

“Dead, so be it, as long as I’m beautiful.” – Yan Yan, Beauty Queen.

These stories of an unnamed, deceased transpinay queen inspired the well-received local films ‘Die Beautiful’ and ‘Quick Change’. Both films featured the trans actress Mimi Juarez, who was awarded a Best Actor award. These films reflect the realities of transpinays in the Philippines: that self-medicated transition is a fearless and peer-trusting practice and, indeed, some would rather die beautiful than die masculine.

Summary and Recommendations: To Live Beautifully

Having taken into account the themes that emerged in my interviews over the years and my close interaction with other transpinays while living within the subculture of the Philippine queer movement, it is clear that the absence of gender recognition laws, medical plans and anti-discrimination laws have an impact on this community. In spite of these challenges, transpinays have found ways to navigate this exclusive system to fulfil their ideals of transitioning their bodies and selves. The lack of options within the medical system and the lack of acknowledgement of the presence of trans people and their health needs, has pushed many to bypass this system and to find affordable medically unsupervised treatments.

Another barrier to accessing medical care is the insufficient knowledge of medical professionals about the healthcare needs of trans people. Many doctors are not aware that Standards of Care, published by the World Association of Transgender Health, exist or even if they know, they are not willing to apply these standards. This creates an environment in which trans people avoid medical care altogether and resort to cultural practices of self-medication. Lack of acknowledgement within the Filipino medical system leads many trans people travel to Thailand for gender-affirming surgeries, where it is not only cheaper, but they can often access treatment faster than they would in the Philippines.

Transpinay health is likewise undermined by the absence of accessible medical information, for example information on pharmaceutical packaging that might be relevant to people who use these drugs for medical gender transition. As many transpinays say: if it is not written, it is not a rule.

Just as the Philippines’ pre-colonial history was transmitted via oral tradition, trans healthcare practices today spread through word of mouth, at the

community level. The relative absence of anti-discrimination laws forces some trans people to continue medically unsupervised transition practices, in order to “pass” in public. Yet, even if trans people can physically change to their desired appearance, their legal identity documents remain unchanged. This discrepancy adds to the oppression and violence that trans people experience day-to-day.

The two presented public figures, Vice Ganda and Jennifer Laude, are two representatives of queer identities in a catholic society like the Philippines. However, they are quite opposite. Vice is respected and adored as an entertainer. Their fame and fortune allow them to sail above most prejudices and stereotypes. Jennifer, on the other hand, was a survivor day-to-day. She was poor and ordinary. She had to survive in her small niche through sex work, which exposed her to additional risks of violence. Jennifer was murdered in October 2014 by a US marine. She became the face of hate crime in a country that relies on its colonial past and preaches how to live through the doctrines of the catholic church. To be *maganda*, or beautiful, in our country can be deadly.

There is a need for change on many levels. Structurally, the government of the Philippines must reconsider their stance on the SOGIE bill and to ensure it is enacted to protect the oppressed and invisible. On another level, the church must help to preach acceptance, instead of punishment. Medical institutions should find ways to include trans people in consultations and offer accessible language for treatment and procedures. Media should stop presenting queer people as objects of laughter and ridicule. Instead, it should move towards expansive and inclusive portrayals that reflect our authentic realities. Philippine society must reflect on the urgency of our needs to allow us to live our lives fully. Trans people should be more than just headlines in the daily news, where our stories range from being a beautiful feminine person in beauty pageants, to being victims of murder because allegedly we did not disclose our transness. There is much that needs to be done. At the end of the day, if society calls us *ganda* then at least we should be treated like it.

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