

## Life in general

**Nov. 2, 1947**

Born in Boston. Has memories of cross-dressing in elementary school, but in high school played on the football team.

**1965**

Graduated from high school and enrolled in Boston University.

**1966**

Transferred to Brandeis University.

**1969**

Graduated from Brandeis and enrolled at Boston University School of Medicine. Got married.

**1972**

Son Joseph was born.

**1973**

Received medical degree.

**1974**

Son H. Clifford was born.

**1978**

Became licensed to practice medicine in North Carolina. Joined the faculty of Bowman Gray School of Medicine.

**1986**

Divorced first wife.

**1987**

Married Marsha.

**1989**

Became director of the Center for Voice Disorders and Swallowing of Wake Forest University.

*Renowned doctor, haunted by mixed feelings,  
decides at 55 that it's time to change genders*

# INNER WOMAN EMERGES



Jamie Koufman, who had facial-feminization surgery in 2003, learned how to use makeup by experimenting.

JOURNAL PHOTO BY MEGAN MORR



**1997**

Separated from second wife and came out as a gay man.

**1999**

Received joint appointment to be clinical professor of surgery at George Washington University School of Medicine.

**2000**

Attended first meeting of the Triad Gender Support Group.

### Transition

**Summer 2002**

Decided to to become a woman.

**December 2002**

Created transition road map.

**June 10, 2003**

Facial-feminization surgery in San Francisco.

**November 2003**

Breast-augmentation surgery.

**February 2004**

Breast surgery redone for cosmetic reasons.

**June 8, 2004**

Genital-reassignment surgery.



# 'I wanted to be good ... to have a normal life'

By Danielle Deaver  
JOURNAL REPORTER

She was alone for the first time since the surgery. She walked slowly into the kitchen and made some coffee. She carried her mug into the small, sheltered garden behind her room at the hotel in San Francisco, eased into a chair and looked around. She studied the flowers and the garden furniture and looked up at the ever-changing sky.

That's when the thought occurred to Dr. Jamie Koufman.

*I've survived.*

It hadn't felt like survival when she woke up in wrenching pain five days earlier after a 10-hour opera-

tion during which bones in her face had been intentionally broken and reset. The surgery had been the result of years of planning and hoping, but that didn't relieve the agony. It felt as if her fingernails were being pulled out — one by one.

The next day, Koufman could sit up. Her face was wrapped in bandages, and clear tubes drained blood into plastic catchalls next to her ears. Her face had been recast to look more feminine — a browline that didn't overhang, a more delicate nose, a jawline that was more rounded.

There was a steep price to be paid

for Koufman's decision, at age 55, to challenge society's definition of gender by changing what many believe is a God-given aspect of a person's identity.

Family members, especially her two youngest sons, were devastated that she would undergo a sex change. Friends and neighbors would watch each painful and often humiliating step.

Koufman, a world-renowned throat surgeon at Wake Forest University Baptist Medical Center, was also putting her professional reputation on the line. She would have to explain her sex change to the med-

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### Estimated costs of male-to-female transition

Genital-reassignment surgery

\$15,500

Tracheal shave

\$3,500

Labiaplasty (inpatient)

\$3,500

Breast augmentation

\$5,000

Skin graft

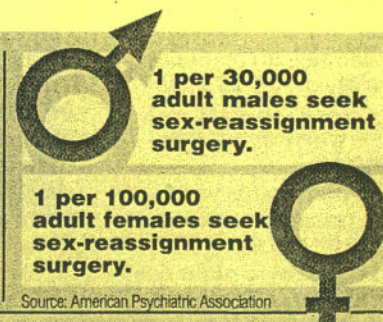
\$1,000

Facial feminization

\$40,000\*

Source: Marci L. Bowers, M.D.

\* ranges from \$30,000 to \$50,000



### Definitions

#### Transsexual:

A person who is predisposed to identify with the opposite sex or who takes steps — hormonal, surgical or otherwise — to change gender.

#### Intersex:

People who are born with ambiguous genitals.

#### Cross-dresser:

Someone who enjoys occasionally dressing and acting like the opposite sex. True cross-dressers are usually not transsexual, and most are male.

#### Transition:

The process of changing one's sex medically and legally, and informing family and friends of that decision.

#### Gender-identity disorder:

A conflict between a person's physical gender and that person's self-identification.



*"Once I decided I was a gay guy and went out and tried the gay world, I was promptly rejected by most men I dated.... I didn't fit...."*

Jamie Koufman

## KOUFMAN

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ical community in which she had worked for 25 years and to patients who must trust her enough to put their lives in her hands.

But Koufman had always been a survivor. She knew that many transsexuals either become the gender they believe themselves born to be or despair so deeply that they commit suicide. By becoming a woman, she felt, she had avoided plunging into the depths of hopelessness.

Her personality, shaped significantly by her struggle with her gender, was strong enough and selfish enough to make the 2½-year journey from man to woman.

"What is the famous quote — there's a point at which change must occur. The status quo is no longer tolerable. So I asked myself the question one day, and said, 'Given a choice, if you could have one or the other, which would you prefer — winning the Nobel Prize for your work or to live the rest of your life as a woman?'" Koufman said.

"Even knowing that I was going to go from being a fairly good-looking older man to being essentially a middle-age woman, which is not as cool by societal standards, I didn't care. I just didn't care."

There were more operations to come after the June 2003 facial work — she still had her male genitals, for example — and she knew that she also was yet to endure dealing with other people's reactions. But at that moment in the hotel, as she stared at the sky and the flowers, a feeling of peace flowed through her. She was a woman, with a woman's face.

"I think there was a profound change that occurred. The world stood still. It was a very spiritual experience," she said.

She had survived.

and live a normal life that they can do it and it will all go away," Koufman said. "I wanted to be good, I wanted to have a normal life, I wanted to have children."

The Koufmans had two sons. And Koufman continued to secretly dress in women's clothes and to seek out other men.

### Surgeon of note

Koufman had grown up planning to be a lawyer like his father, Joseph. But his father died when Koufman was 16, and dealings with the father's law firm didn't go well. Disgusted with lawyers, Koufman decided to become a general surgeon, the profession of two uncles.

Medicine was not at first a calling, but it became so after Koufman found a field that was challenging and engaging — disorders of the voice and throat.

"There was no real field of laryngology before 1978. It was just coming out of the Stone Age. We could hardly examine the larynx, except with a mirror, which was what we did 100 years ago," Koufman said.

After a stint as chief resident in a Boston hospital in 1978, Koufman found a job at what was then the Bowman Gray School of Medicine, where he became the fourth person in the country to get a CO<sub>2</sub> laser, now one of the most versatile tools in throat surgery.

Koufman was one of the first academic surgeons in the country who was a full-time laryngologist, and he was able to assemble a team of speech pathologists and experts from several other fields, such as neurology, endocrinology and gastroenterology.

Bowman Gray recognized Koufman's work by creating the Center for Voice and Swallowing Disorders of Wake Forest University. Koufman became the founder and director in 1987.

During these early years, the gender and emotional problems that had plagued Koufman faded into the background. He was simply a scientist focused on his research and clinical practice, discovering the extent to which acid reflux can damage a voice and throat and possibly even contribute to cancer of the larynx.

Koufman developed many procedures that helped people who had never been able to speak, and he moved up quickly through the ranks at medical school, from instructor in surgery to assistant professor in one year, and to full professor in 1994.

In 1986, his personal life took a turn. His marriage to his first wife ended in divorce. A year later, he married a woman who he believed was his soul mate.



### Golden child

Koufman can't remember an exact time or place when she first consciously thought of herself as a girl.

She remembers little things — walking repeatedly into the girls' bathroom at preschool, making friends with girls rather than boys, wanting to play tea party instead of war.

Most of all, the golden-haired boy, the long-awaited and only child in a large extended family whose members socialized with the Kennedys in Boston, liked to pretend that he was a girl.

Not that he told anyone, of course. It was his little secret with the mirror. Behind closed doors, he could change his body to match the picture in his mind. Jamie (his nickname as a boy) Koufman could become a girl.

"By age 7, I was wearing my mother's clothes. Her car wouldn't be at the end of the driveway before I had on a pair of her hose and heels. I didn't understand any of this."

Things got worse as Koufman got older.

"Adolescence is a very painful time for transsexuals because when your body starts to change, it's all the wrong stuff, it's not the stuff you want. Gee, my legs are less smooth, I'm growing a beard, I have all this stuff that I don't want. (There is) a lot of depression for transsexuals during adolescence."

But Koufman showed no signs of depression and doubt. He was smart and strong-willed, hyper and, above all, artful. He knew what he needed to do. He would try to change his desires to match how he looked.

"Around the time of my father's death I said, 'Enough, I'm not going to survive this way. I have to butch it up.' And I did.... I played football in high school, and so I did the best I could."

Koufman was convincing enough to date the head cheerleader at his school, all the while wishing that he was the one with the pompoms and the cute short skirt. He also continued to be sexually interested in other men.

As a first-year student at Boston University School of Medicine, Koufman got married, not even struggling with the decision.

"Transsexuals who don't know they're transsexuals, even those that get into therapy, believe that if they throw away all their women's clothes

### Personal torment

Marsha Leonard and Koufman met when she interviewed for a job in his office, and the two eventually fell in love and married.

"And it really wasn't a gender thing. I was faithful to her," Koufman said. "I was absolutely in every way faithful to her. My vows meant something."

They lived in a house in West End after their marriage and created a combined family with her two sons and his two sons. For almost 10 years, that seemed enough.

But Koufman was still tormented by the desires that he had had since childhood to cross-dress, and it affected his relationship with Marsha, who declined to be interviewed for this story.

"I liked her, I cherished her as a friend and a co-parent, as a gentle, kind, good soul.... We weren't having good intimate relations because I was identifying with her. I couldn't help it. I went through therapy, I went through counseling, I went through all of it."

Koufman became convinced that he was gay.

He told Marsha that and left her in 1997. She began going to gay bars, dressed in women's clothing. But something wasn't right. The reception wasn't what Koufman expected.

"Once I decided I was a gay guy and went out and tried the gay world, I was promptly rejected by most men I dated, as, 'Stop shaving your legs, and, no, you can't wear that to the party; it looks like a dress. If I wanted to be with a woman, I wouldn't be gay, now would I?' I didn't fit into the gay world."

Things had been easier when he



JOURNAL PHOTO BY MEGAN MORRIS

During an interview, Koufman pauses to reflect about what her life was like as a male.



was a beautiful young man looking for men — then he had a “stop-traffic look for other men.”

Some friends thought that Koufman might be transsexual. He couldn't explain how he felt.

“I used to protest that I don't really want to be a girl; I just like to be girlie sometimes. I had friends who said I was transsexual. I said ‘no,’ because I wasn't prepared to deal with the consequences of that,” Koufman said.

It was an emotional infrastructure that he had spent years building up — a defense system to make himself believe that he wasn't — that he couldn't be — a woman in a man's body. But the system was slowly breaking down.

Koufman began researching transsexualism on the Internet, found a local support group, the Triad Gender Association, and started seeing psychologists who specialize in transgender issues.

“The final question was, ‘Is there any question in your mind that I'm transsexual?’ And they would say ‘No, you're transsexual.’ There's so many familiar refrains.”

Still, Koufman had to be sure. He started to branch out, going to meetings around the country, and spending those weekends away as a woman. He would take only women's clothing, to see how it felt. He liked it.

In the summer of 2002, after a long struggle, Koufman decided to become a woman. Acting as his own physician, he put himself on estrogen and started researching how to proceed.

Koufman also discovered some intriguing research about the origins of transsexuality.

### Finding an explanation

The basis of transsexuality — whether it's psychological or biological — is still being debated. The American Psychiatric Association uses the term gender identity disorder to describe transsexuality. It estimates that one in 100,000 women and one in 30,000 men seek sex-reassignment surgery — an estimate that transsexual activists say is too low.

Koufman believes strongly in a biological explanation.

He began researching that issue after attending a meeting of the Triad Gender Association in December 2002. A doctor — Koufman doesn't remember his or her name — came to speak about transsexuality and casually mentioned the connection that some people were beginning to believe existed between transsexualism and DES.

DES, or diethylstilbestrol, was a powerful estrogen prescribed from 1948 to 1971 for 5 million to 10 million pregnant women who were at risk of miscarrying. Supporters of the theory linking DES and transgenderism believe that the estrogen caused changes

in the developing brains of some male fetuses.

Koufman's mother had multiple miscarriages before she carried Koufman to term. Though unable to get her medical records, Koufman said it appeared likely that Beverly Koufman had taken DES during the pregnancy, given that she was wealthy and able to receive the presumed best treatment of her day.

While doing research, Koufman also discovered a Dutch study described in the November 1995 issue of the journal *Nature*. Researchers had examined the brains of six male-to-female transsexuals after their deaths. Researchers looked at an area in the hypothalamus called the central division of the bed nucleus of the stria terminalis.

The researchers found that in the transsexuals, the area was smaller and darker than the area in nontranssexual men, including homosexual men. In fact, the area looked like the bed nucleus typically found in the brain of a woman.

It was just one study in a profession that does not give credence to anything until it has been duplicated a number of times, but it caught people's eyes. Koufman first saw the study in 2002.

The article caused a stir not just among transsexuals but in the mainstream media. *The Washington Post* and *Time* magazine ran stories about the study with headlines such as “Science: Trapped in the body of a man?”

“I saw this and thought, wait a minute, there's a lot of people whose stories are like mine, and there's a biologic basis for this. There really is. That was a huge eye-opener,” Koufman said.

“I began to listen to the stories of other people, and I said to myself, ‘I lied to myself my whole life.’ I didn't know what to say, and I guess I can't be faulted for the lie, but I guess it's better late than never,” Koufman said. “I think people seem to talk down the biologic basis of who we are, what's in our genes, what's in our brain chemistry. And so on. But for us, it's a biologic drive. It's not easily overcome. It's not overcome at all.”

### Journey of change

By December 2002, Koufman had put together what she now calls “a transition road map.”

“I decided each step, how to do it and when, but more importantly, before that time I began to talk to people in my family. My friends, and family. And at work, and if there's one thing I have to say, it's that I think I was a good communicator starting early on,” Koufman said.

She gave people information about transsexuality so that they would understand the condition. Many still didn't.

“The decision to transition wasn't made in a vacuum. I had to discuss it with my colleagues, my family. My wife was horrified.”

After he made the decision, Koufman told the children.

Colleagues were surprised.

“Dr. Koufman talked to the staff before, to go into all the other details. When he was a him, he sat down with us and told us he had been having a lot of conflicts in his life, and he had talked to Marsha, and he said he felt he was trapped in a man's body,” said Janet Fox, the patient-care team manager for the otolaryngology operating room. “He was very upfront with us and asked if we had a problem with it.... He just wanted to know what our feelings were about it. Dr. Koufman was a gorgeous man, and we had trouble picturing him as a woman.”

Koufman forged ahead, deciding which surgeries to have, when and where to have them done. The road map included decisions about when to tell people and how to tell patients — if he stayed at Wake Forest University Baptist Medical Center.

“I could have retired. I could have gone away,” Koufman said. “But I couldn't do that. I couldn't do that for two reasons. I didn't want to abandon my patients; I didn't want to abandon my work. And I started the voice center. I wanted to finish what I started.”

He had several surgical options. Some transsexuals decide to do the work that will allow them to look like their new gender, but don't have the surgery to change their genitals. Others do it the opposite way, having the genital-reassignment surgery but not the painful and expensive facial surgery.

Koufman ultimately decided to have every available procedure done — facial feminization, electrolysis, genital-reassignment surgery — a process that ultimately would cost about \$100,000 and result in physical pain.

Koufman said she felt that it would be worth it.

“It was an easy decision. I didn't want to look like a man in a dress. I didn't want to look masculine,” Koufman said.

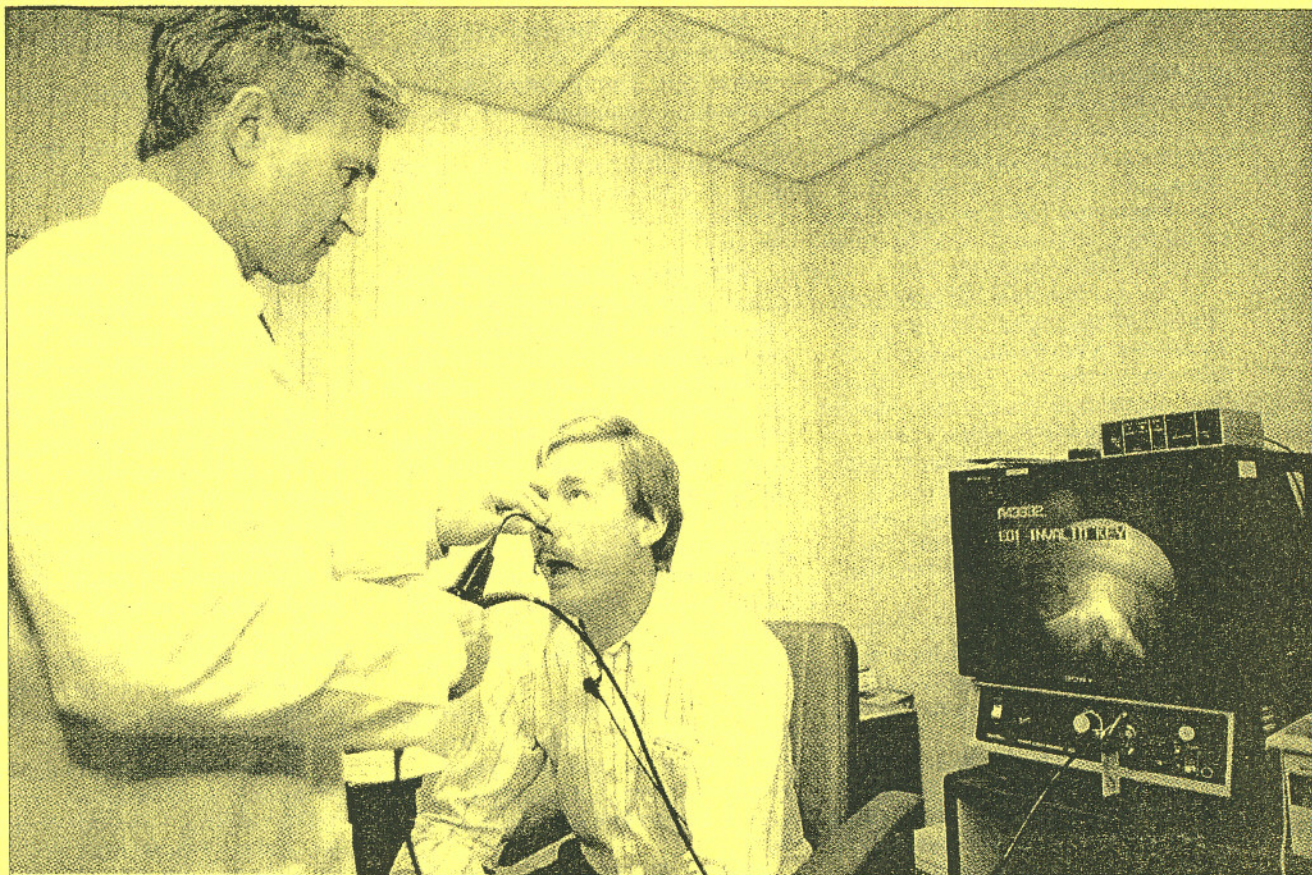
It meant starting out with the facial-feminization surgery, which carried the possibility of complications to the sinuses, nasal areas and eyes in addition to the overall complications that can result from major surgery.

As the date of the surgery in San Francisco approached, Koufman became nervous. When he returned, it would be as a woman, and the world would know it. But what would happen to the brash, demanding man who had existed for 55 years?

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JOURNAL FILE PHOTO

**BEFORE AND AFTER:** Above, Jamie Koufman, in 1992, watches patient Howard Skillington's vocal cords at work. Below, in March of this year, Koufman examines Margaret Doerle of Tarboro at the Wake Forest Center for Voice and Swallowing Disorders.



JOURNAL PHOTO BY MEGAN MORR



**"I'm much more at peace with  
who I am. I'm a much more gentle person."**



JOURNAL PHOTOS BY MEGAN MORRIS

Dr. Jamie Koufman, the director of the Center for Voice and Swallowing Disorders, performs surgery at Baptist Hospital.

# PRACTICING BEING HERSELF



*With painful and costly sex change behind her,  
doctor nourishes her softer side as she works  
to find and understand her role as a woman*

By Danielle Deaver  
JOURNAL REPORTER

**D**r. Jamie Koufman was at the top. In 25 years in Winston-Salem, Koufman had established a reputation as an aggressive, innovative throat surgeon and a renowned specialist in laryngology.

**SECOND OF  
TWO PARTS**

Wake Forest University Baptist Medical Center had established a Center for Voice and Swallowing Disorders under Koufman's direction.

But Koufman, known for perfectionism and an outspoken manner, was uneasy. Deciding to act on a belief that he was a woman trapped in a man's body filled him with a nagging fear. People had been fired or had their professional reputations destroyed because they were transsexuals.

In January 2003, Koufman made a typically brash decision. He called

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Koufman, leading a lunchtime meeting with colleagues at the medical school, said she has become keenly aware of the way that women are routinely marginalized in our society.



# BEING HERSELF

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Daniel and Laura Hart McKinny, a filmmaking couple at the N.C. School of the Arts, and asked them if they would make a documentary about him as he made his transition from male to female. The McKinnys were intrigued at the idea of filming a story in which the ending was unknown — would he actually go through with it? — and agreed.

For Koufman, doing a film was a natural.

"One of the reasons I was doing a documentary was I was afraid I might be fired. So, that way, if I went from being this great person to a devil in six months, I would have some documentation," Koufman said.

Koufman showed bravado and fear when asked last summer why she thought that her sex-change operation had brought her few, if any, professional consequences.

"I think they were scared of me, that they would face a massive lawsuit. There were reasons it didn't happen to me," she said, before quickly backing off.

"I shouldn't say that. I should give them the benefit of the doubt. I would say that I was an important person in the medical community, and people just didn't care."

Koufman's decision took a few people by surprise, said Stan Shapshay, a professor in the otolaryngology department at Boston University School of Medicine. Shapshay and Koufman were medical residents together and have been friends ever since.

"I think there's certainly people out there who are less accepting and view this whole transition with some suspicion in that maybe there is some instability and this would affect Dr. Koufman's ability to function, but I'd say they are in the minority. I'd say we all have great respect for Dr. Koufman's abilities. People who are her friends are happy that she has made the choices she had to make," Shapshay said.

Sally Shumaker, then the associate dean of faculty affairs at the Wake Forest medical school, had been in her job for two weeks in the winter of 2003 when Koufman told her about what was happening.

Shumaker was aware of Koufman's international reputation as a surgeon.

"I also wanted to learn as much as I could about transitions, sex changes, and how we could make this environment as comfortable as possible for her to make this change," she said.

The administration never officially discussed Koufman's decision, Shumaker said.

Today, Koufman called the administrators visionary for how they handled her change. She said she believes that they wanted to show the world that the medical center is liberal and fair enough to handle this type of experience.

Koufman said she is glad that she did the documentary, even though she ultimately didn't need it for job protection. She hopes that the film, which will be shown Saturday night as part of the RiverRun International Film Festival, helps more people understand transsexuals and what they go through.

"When they see what it really is, someone who has the money and everything else, it is still brutally difficult. When you see me in this documentary, you will not see all pretty stuff. You'll see parts that are difficult, on the edge of giving up," she said. "Pretty beaten up emotionally and physically — and I have a lot of resilience — and it was very difficult at times."



### Learning a new life

By July 2003, Koufman had a woman's face and wore her hair in a short, fashionable bob. The parts that weren't feminine — she still had male genitals — would be fixed by more surgery in the next year.

She returned to work at the medical center after her usual monthlong sabbatical. She always took the month of June off. In 2003, she had used the time to have the facial-feminization surgery.

She would have to live as a woman for a full year before she could have the final surgery to alter her genitalia.

Even though she had long dreamed of being a woman, she felt like a neophyte that first summer. She had cross-dressed throughout her life, but she had never had to assemble a female wardrobe for work, or put on makeup that would carry her through a professional day.

She would have to learn to be a grownup all over again.

One of the first things she did after she recovered was shop.

"Which place didn't I go to? I went to the Gap. I went to Old Navy, Dillard's," she said. "I must have spent \$3,000, \$4,000, and I wasn't buying expensive stuff."

She had to think about how she walked, even though she was used to high heels from her cross-dressing.

She made some mistakes. A black bra — instead of a camisole or nude underwear — worn under a thin black blouse brought complaints from other people at the medical center that she was dressing inappropriately.

The complaints made it clear that people were watching her.

"People didn't believe it. People were afraid; people were angry. People said things like 'I can't deal with this,'" Koufman said.

Of all the people affected by her change, Koufman said, her patients seemed the least upset. Only one patient, Koufman said, left because of the sex change. Other patients among the thousands who have seen Koufman may have quietly stopped because of the change, or because she was out of work for five out of 18 months in 2003 and 2004 as she underwent her surgeries and recuperation.

Koufman had created a two-page disclosure letter that explained what she had done and why. She handed it out to hundreds of patients every month.

When patients came to see her, a nurse gave them the letter to read before they saw Koufman.

"Then when I went in, I'd say to the patient, 'Are we OK, do we have to talk about this?'" Koufman said. "My perspective was, look, peo-

ple don't come to see me for anything having to do with my personal life, and I realize that, but they do have a right to know why I look different."

The letter gave the patient information about how to contact Shumaker with questions.

Shumaker said she received just one inquiry.

Some patients had questions, Koufman said, but not many. There was one group that reacted more than others — the clergymen whom she treats.

"When a patient came to me, a religious person, and said, 'God doesn't make mistakes and you were made a man,' I said, 'God doesn't make mistakes and God made me transsexual.' And that seemed actually to satisfy," Koufman said. "I think a lot of clergy have taken the position God has a special plan for you, and I believe that is the case."

### Mixed problems

There are some reactions by some people that Koufman has not been able to avoid. She does not like to talk about the feelings or reactions of family members, but she admits that they were devastated by her decision and remain extremely uncomfortable.

"Both of my kids still have some problems with this. They can't say, 'Hey, my mom and dad are going to join us for dinner.' What are they going to say, 'My mom and my transsexual-now-a-woman dad is.' Who wants to explain that all day?" Koufman said. "It's hard for them. They lost their father."

Her ex-wife, Marsha, has agonized over what the decision has done to her two sons. Marsha Koufman declined to be interviewed for this story.

And though Jamie Koufman has found a measure of peace and almost total self-acceptance through the change, she now laughs, somewhat ruefully, when talking about her hopes for looking like a "taller, sleeker Britney Spears" after her transition.

"I'm a little pissed that I didn't get to be that drop-dead gorgeous 18-year-old who comes flying out of the mall in little minishorts with a flip of the hair and every male of every species in a three-mile radius stops in his tracks. I missed that phase, sorry to say."

In an ironic twist for a specialist in voice disorders, Koufman also has had to realize that she will always be unhappy with her voice. There are few surgeries that she endorses to feminize the voice, though she is working to develop some. Today, Koufman's voice, while feminine, is husky; she said she's taken voice lessons to make it more acceptable.

She also lost some of the anonymity that she had outside of the medical center.

"If I show up, 30 people will say, 'That's the doctor who had the sex change.' It's almost a type of celebrity, which is of course not necessarily the kind you want," she said last August.

But Koufman is not hiding from publicity. Besides the film to debut this week at RiverRun, she is moving into becoming more of an advocate in the transgender community.

### Surgery and its aftermath

Koufman had already gone through most of her transition — learning how to live as a woman, telling people she was a woman, and finding out about some of the more annoying aspects of being female — before she had the final surgery that truly made her a female.

She had the genital-reassignment surgery on June 8 of last year in Trinidad, Colo., after carefully researching the centers and doctors offering the procedure. It was of shorter duration and easier than the facial-feminization surgery. She spent three days in the hospital, then went to a local



hotel set up for people recovering from such surgery.

When Koufman was alone, she got a full-length mirror and finally saw what she had waited a lifetime to achieve.

"I tried on a pair of stretch capri pants so I could admire my new crotch contour," she said.

On the way home, things became more difficult. Koufman was miserable during her layover in Chicago.

"My hormones were all screwed up," she said. "I cried the whole time we were in O'Hare."

Things were still difficult when she got home and an unexpected problem arose. The medicine that she had been taking for a urinary-tract infection after her surgery made her tendons more vulnerable. Koufman ended up tearing the Achilles tendon — the area between her foot and calf — on her left leg. She spent the first several weeks in a cast and using crutches and a mechanical Hovercraft to get around the medical center.

She also found out how time-consuming womanhood can be. She was spending as much as two hours a day — made a little longer because of the cast on her leg — doing her hair and make-up and getting dressed. For the first six months, she also had to spend 30 to 60 minutes a day on exercises that would ensure her new female genitalia healed properly.

But she said she felt free and happy.

"With gender-reassignment surgery my transition, which has been a deeply introspective and personal journey for me, comes to its conclusion. I've done it. My gender is forever changed. I am ready to go on with my life," she said. "This transformation has been so profound that I cannot help but feel that it is about more than gender."

#### Politics and advocacy

A few months after her surgery, Koufman created a Web site, [www.inbroaddaylight.net](http://www.inbroaddaylight.net), and she has become a sort of folk hero in the transgender community.

She gets e-mails from all over from people asking for emotional support and medical advice.

"In view of the fact that even though I'm a stranger, I'm not a stranger. I mean, I get a lot of letters — they're like fan mail, I guess — from the Web site. But they say, 'I will never be able to do what you've done,' and it's still good to see it. That's a hard message," she said. "You get some of these angry, like, 'You know, who do you think you are just because you have a bunch of money you can do this and the rest of us poor transsexuals can't afford to do what you've done,' and that hurts, too."

Koufman also is admired among transsexuals for her willingness to talk.

"What Jamie's doing has a tremendous potential to help as well," said W. Meredith Bacon, a political-science professor at the University of Minnesota at Omaha. Bacon is one of the few academics in the country who studies transsexuals' behavior — specifically, who they are and what their political concerns are. "She is an invaluable member of the transsexual community. She is respected and looked up to as somebody who took control of her own life, as somebody who was honest about who she was when it came time to make a decision."

Koufman said she also counsels people who are close to home, including some colleagues at the medical center who believe that they are transsexual.

She has been speaking out about the transsexual experience. She appeared in *The Vagina Monologues* at the Arts Council Theatre in Winston-Salem last month. The monologues are a series of skits and speeches designed to increase understanding of women and to raise awareness

#### A woman's life

At the end of her long journey, Koufman said she has no regrets.

"Basically, I'm happy. I needed to do this," she said. "I'm just as assertive as I ever was, but I'm not as aggressive. I'm much more at peace with who I am, I'm a much more gentle person."

And she remains hopeful that her family will come on board.

"When you're in your 50s and you transition, you have a whole bunch of people who have to come with you. It's not like I'm a little young thing," she said. "Just like Winston-Salem is different and will be different in two years, so will my relationships. There's a lot of family stuff that hasn't evolved yet, and that's difficult. My family still hasn't reconciled who I am and where I am yet."

There is something else she lost. People outside the hospital seemed to treat her differently.

Koufman said she saw the change almost as soon as she began looking and dressing like a woman. Taxi drivers in Washington, where she has a clinic, were not as respectful. It was harder to get the attention of a maitre d' in a restaurant.

Koufman recalls a day when a company representative went to speak to people in the otolaryngology offices. The representative had set up a lunch, and people who worked in the office were walking into the room to eat and to hear his sales pitch.

"He was new, and every time one of the residents — you know, squeaky shiny clean doctors in greens and a white coat — every time one of them came in, he'd pop up like a jack-in-the-box. You know, 'Hi! I'm John from so and so,'" Koufman said.

"I came in, a middle-age woman, right, so I'm going to be a secretary or a nurse. There was no jumping up when I arrived."

"So I made myself a plate; I sat down and began talking with the residents. The residents got the message and said, 'Oh, John, this is Dr. Koufman. She runs the voice center.' Well, all the sudden, I got a jump-up."

It made her think about women's power, she said, and how she had treated women herself.

"It wasn't that I was exactly a sensitive man; I was pretty much a bully myself. I had an agenda and I wasn't too worried about other people's feelings," she said.

Koufman said she has been amazed to now see so clearly the difference in how society treats men and women. It's something that she thinks about and talks about frequently.

"I think people like me who have seen the world from both sides of the gender divide do have a unique perspective to share — which is that women do get marginalized in my opinion in a variety of settings simply because they are women," she said. "I think that women are going to become truly equals in the next 100 years or so. They're not equals now — they're really not. I get marginalized 10 times a day."

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**Koufman chose to get facial-feminization surgery a year before the genital-reassignment operation.**

about violence against women. Koufman was a co-producer of the show and was invited by other transsexuals to participate in a skit written for transsexual women.

She said she has made many friends among transsexual women, and flew to Colorado to help one through genital-reassignment surgery. Since her surgery, Koufman, who likes to cook, said she has people over to dinner, goes out to brunch, watches movies and relaxes more at home with friends.

"I think what I discovered is that the guy I was was driven to do things, to buy things. I cut back on my practice. I don't see as many patients. I spend more time with people. I don't make as much money. My patients are happier. I connect with more people, and I have made more friends in the past two years than I have in the rest of my life."

Colleagues said they have noticed the difference.

"I think there's been a 180-degree change in Dr. Koufman. I worked with Dr. Koufman for nine years, and Dr. Koufman is world-famous because of the voice center. Before, Dr. Koufman was all business," said Janet Fox, the patient-care team manager for the otolaryngology operating room.

Koufman is more personable now, with her staff and with her patients, Fox said. She asks her staff how things are going in their personal lives and touches them more in caring gestures.

"It's almost as if Dr. Koufman is a totally new person now. And we're just crazy about her. We just love her to death," Fox said.



*"When you see me in this documentary,  
you will not see all pretty stuff. You'll see parts that are difficult,  
on the edge of giving up."*

**Jamie Koufman**



JOURNAL PHOTOS BY MEGAN MORRIS

Jamie Koufman's license tag, which stands for "Trans Girl," shows her joy at becoming a woman.



Koufman checks her makeup one last time before going onstage for her role in *The Vagina Monologues*.



