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FTM Trans Theory VS. Trans Narratives

Working Towards an Updated Trans Theory

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Abstract

Theories are tools with which we critically analyze society's structure and understand experiences that are not our own. When theories no longer describe the narratives that they claim, we must update them. This thesis proposes to do just that. The trans theories of J. Halberstam and Jay Prosser will be analyzed using ten autobiographies written by self-identified FTM transsexuals and transmen. Prosser and Halberstam are two well-known theorists in the field of trans theory. J. Halberstam approaches FTM transsexuality from the perspective of a lesbian feminist, who has an understanding of transgender butch individuals. Jay Prosser writes from the perspective of being a FTM transsexual himself. I chose publications by these theorists because they had sections that focused specifically on FTM narratives, and they both used at least two of the autobiographies I use and they were published the same year. Therefore, I found them to be two theoretical frameworks that could be compared on several different levels. The publication dates of the ten narratives range from the 1970s to the early 2000s. Applicability of the theories will be measured by comparing them to what the autobiographers say about their lives. The tool of analysis will be five focus areas that are represented, to some degree, in each narrative. They are: Trying to fit into female roll/body/world; Discovering one is Trans/Coming Out; Acquiring Hormones and Sexual Reassignment Surgery; Trying to Establish/Re-establish a Confident Identity; and Romantic/Sexual Relationships.. I will discuss how helpful each theory is in accordance with these narratives. The aim of this thesis is to assess how well each theorist addresses the issue of transsexual identity. The field of transsexual research is still new and developing, there are many interesting parts of these narratives that can be delved into further. I will conclude by proposing a new trans theoretical view point that would better help one to understand the process of female-to-male transition. What one should take away from this thesis is that despite differences in sex and gender formation, these people are, like the rest of the world, trying to create an identity that they not only feel comfortable with as a representation of themselves, but also one that they can be proud of.

Keywords: Female-to-Male (FTM), Halberstam, Gender Identity Disorder, Hysterectomy, Male-to-Female (MTF), Mastectomy, Metoidioplasty, Phalloplasty, Sexual Reassignment Surgery (SRS), Transgender, Transsexual

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1. INTRODUCTION

One of the functions of queer and gender theories, of which trans theory is one category, is to provide academics and lay people alike with a new way of looking at the binary gender system. These theories question beliefs about gender and sexuality that have been taken for granted in societies around the world for centuries. One purpose of the theory is to represent and describe what gender and sexuality formation actually is or could be, if societal binary constraints were lifted. Therefore, this kind of theoretical perspective is applicable when it brings to light problems with current societal structures and addresses those problems in a way that is sensitive and descriptive of those who do not identify as strictly male or female. In other words, for a gender or queer theory to be an applicable tool for those who wish to better understand the way gender and sexuality really do manifest in, for this thesis the UK and USA, then it must question normative society and clearly illustrate where gender norms lack for so many people, while keeping in mind that many do identify as either man or woman and do not feel the need to change that binary.¹

The purpose of this thesis is to investigate whether theories of female-to-male (FTM) transsexuality, by J. Halberstam and Jay Prosser, are applicable tools for doing the above: helping us to understand how gender is addressed and described in FTM autobiographies and how the blindly accepted binary gender system affects these people who do not fit into it.² The trans theories of these respected theorists will be discussed alongside autobiographies of FTM transsexuals' life stories. Applicability will be measured by comparing the theories to what transsexuals say about their lives and I will discuss how useful each theory is in accordance with the subjective realities of these narratives. The aim of this thesis is not to say whether one theorist is better than another but to assess how well each theorist addresses the multifaceted and complex issue of transsexual identity as it is addressed and represented in these autobiographies.³ Both Halberstam and Prosser aim to ground their theories within the subjective realities of these trans narratives, but my study will show that they are not applicable to the narratives that they try to represent. Therefore, I will conclude by initiating the formation of a new trans theoretical view point that would better help one to understand the process of female-to-male transition and those that undergo it.

¹ Stryker and Whittle, (2006)

² Ibid

³ Ibid

1.1. PERSONAL PERSPECTIVE

To give the reader an understanding of my use of language, it is necessary to give a little personal background information. I am writing this thesis from the perspective of a female-bodied, female-identified Caucasian woman in the 21st century. Therefore, I recognize that my point of view influences my understanding of each man's story, affecting how I interpreted these men's stories. Any deeds (for example drug use)⁴ or beliefs (for example that one author's husband was possessed by a spirit)⁵ that did not match my own, influenced the way I interpreted the narratives of these autobiographers. It is not my opinion that people fall into categories of either man or woman, or that men are defined as that which is not woman and vice versa. There are an infinite number of ways to express gender and sexuality, and everyone has the ability to express themselves as they wish, as long as no one is injured.⁶ Many people identify as neither woman nor man, or identify as woman sometimes and man others, or more masculine sometimes, more feminine at others. These people should be treated with the same respect and should be afforded the same rights of other citizens who do identify as man or woman.

That being said, I do not disregard the categories of man and woman. The majority of people in this world have not been shown to have a problem with describing themselves as man or woman, even if they feel that identity has changed over time.⁷ Governments, health systems, legal and other structural organizations are thoroughly imbricated in this male-female binary and at this point in time it is impractical for that to change. The future may offer different opportunities, but for this thesis the identities of man and of woman are not deconstructed, but used as concepts that are, have been and will be deeply imbedded in our society. I have used these identities not only because of my own beliefs about the practicality of them, but also because the identity of manhood is crucial to most of the men who wrote my empirical material.

⁴ Valerio,(2006); Cummings ,(2006)

⁵ Johnson, Brown and Nelson, (1982)

⁶ Stryker et al., (2006)

⁷ I say this because there are only a limited number of transgender and transsexual self-identifying authors, and because most people in the world use the terms man and woman without hesitation.

1.2. DEFINITIONS OF KEY WORDS

To better understand the coming discussion in this thesis, some prior knowledge of transsexuality is needed. As can be seen in Figure 1 below, transsexuality and transgenderism do not mean the same thing. They are sometimes be used, inappropriately, as synonymous terms, however in this paper the definitions below will keep the two separate. Female-to-male transsexual men are born in physically female bodies. When they reach a time of transsexual self realization, they often seek medical assistance to change their bodies from female to male physically and hormonally so that they have congruency between their identities and their bodies, and so that others interact with them as men, instead of female-bodied persons.⁸

Figure 1: Definitions of Transsexual and Transgender⁹

<p>transsexual, <i>adj.</i> and <i>n.</i></p> <p>A. <i>adj.</i> Of or pertaining to transsexualism; having physical characteristics of one sex and psychological characteristics of the other.</p> <p>B. <i>n.</i> A transsexual person. Also, one whose sex has been changed by surgery.</p>	<p>transgender, <i>adj.</i> and <i>n.</i></p> <p>A. <i>adj.</i> Of, relating to, or designating a person whose identity does not conform unambiguously to conventional notions of male or female gender, but combines or moves between these; transgendered. Although often used (esp. among participants in transgender lifestyles) as a generic and inclusive term which deliberately avoids categorizations such as transsexual or transvestite, in wider use <i>transgender</i> is sometimes used synonymously with these more specific terms.</p> <p>B. <i>n.</i> Transgenderism; (now usually) a transgender person.</p>
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The FTM autobiographers describe themselves as transsexuals or transmen. Transman is a term used by men who identify as men but who feel that their transition is an unfinished process, one that describes their particular type of manhood, as discussed in my empirical material.¹⁰

⁸ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Prosser, (1998); Rees, (1996); Valerio, (2006)

⁹ The Oxford English Dictionary, third edition, March 2003; online version March 2011: These definitions match what my own thoughts and feelings are about the definitions and difference between Transsexuality and Transgender.

¹⁰ Paris, (2006); Kailey, (2005) pg. 127

In the mental health field, transsexuality is diagnosed as Gender Identity Disorder (GID).

Gender identity disorder is a conflict between a person's actual physical gender and the gender that person identifies himself or herself as. For example, a person identified as a boy may actually feel and act like a girl. The person experiences significant discomfort with the biological sex they were born.¹¹

In the USA, all FTMs who wish to undergo Sexual Reassignment Surgery (SRS) must have a diagnosis of GID from a medical practitioner who will then give them several written letters of referral to have such surgeries.¹² Without this diagnosis and the subsequent referrals, SRS is not allowed.

There are also important terms to know from the SRS side of transsexuality. Testosterone is a hormone in both men and women. In men it is more dominant and causes the visible markers of maleness (when, as always, compared to femaleness), i.e. facial hair, more defined musculature, deeper voice, etc.¹³ FTM's take injections of testosterone at different intervals based on country, physician and physical need, and it causes the man's female body to exhibit more masculine features. However, the extent of increased hair growth, voice change and muscular definition is still reliant on the person's physical predisposition. FTM's also often (in this thesis 100% of the cases) choose to have mastectomies. This is the removal of breast tissue from the body; there are different procedures that are done depending on breast size. Scarring is more noticeable on those who formally had large breasts, the less breast tissue there is, the fewer or less noticeable scars and complications that usually occur. The removal of breast tissue is usually referred to as "top surgery."¹⁴

FTM's also can choose to have "bottom surgery," or one or more of the following: hysterectomy (the removal of female organs such as uterus, ovaries, fallopian tubes), phalloplasty (the construction of a penis shaped, tube of skin using one of several techniques), metoidioplasty (the creation of a small penis from the testosterone-enlarged

¹¹ Definition from <http://www.ncbi.nlm.nih.gov/pubmedhealth/PMH0002495/> on April 2011, where more information can be found on diagnosis, characteristics of GID and treatment help. While some of the descriptions such as "dress like the opposite sex" are problematic when describing FTM individuals (as it is socially acceptable for women to wear traditional male clothing but not vice versa), the information on this site is from medical sources and is a foundation for further research.

¹² Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Prosser, (1998); Rees, (1996); Valerio, (2006)

¹³ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Prosser, (1998); Rees, (1996); Valerio, (2006)

¹⁴ Green, (2004); Prosser, (1998)

clitoris) and urethral extension (extending the urethra through the constructed phallus to enable traditional male, standing urination).¹⁵ Phalloplasty and urethral extension have a varying success rate and can lead to follow-up corrective surgeries or urinary complications.¹⁶ The ten autobiographies describe most of these procedures.¹⁷

The last clarification point on terminology is that I will be using male pronouns throughout all discussions of the autobiographers. Unlike Bernice Hausman in her research on transsexual autobiographies, I will stay consistent with using male pronouns. Hausman switches back and forth between female and male pronouns when describing events from her autobiographers' lives.¹⁸ I not only find this confusing, as it implies two gendered identities for each person, which may or may not be how they have identified, but it is also inconsiderate of the journey these men have traveled in order to be afforded the use of male pronouns. As will be noted later, some of these men were very sensitive to being called by female pronouns after they had begun their transitions. I continue to use male pronouns for them, even when referring to their girlhoods, because not only do these autobiographies prove that men can and do have female childhoods, but some of them describe referring to themselves (or having others describe them) with male pronouns even at a young age.¹⁹ Again, in respect to their current sex, I use male pronouns.

¹⁵ Green, (2004); Prosser, (1998)

¹⁶ Martino, (1977); Khosla (2006)

¹⁷ More information can be found about these procedures on trans-friendly web-resources; however, for this thesis a brief understanding of each concept or procedure is all that is needed.

¹⁸ Hausman (1995)

¹⁹ Paris (2006); Valerio (2006); Beatie (2008); Khosla (2006)

2. METHODOLOGY

In order to find my empirical materials I took the modern approach of searching on amazon.com (one of the largest online book sellers) for “female-to-male transsexual autobiographies,” using those and similar key words. Through this search, I found and ordered all ten of the categorized autobiographies of self-described transsexual men. Since I used an English word search and that is the language I am most proficient in, I use books written in English. There were many books that came up using this search, but I found only ten that were described as autobiographies of men that had taken measures to change their sex from a perceived female to a perceived male. A deciding qualifier for this thesis was that all of the men were taking testosterone to facilitate their male identity. I do not refer to them as those who necessarily changed their sex legally or physically, because not all of the men were able to legally change their sex by publication, and not all of them had extensive surgery. Most of the books were written by the men themselves, while two of them have co-authors that assisted in the writing process.²⁰ The publication years range from 1977-2008 and the authors are either from the US or the UK.

The focus of this thesis is very narrow; therefore, there will not be an in-depth contextualization within trans studies. For more information on current and past research into trans issues, one can read *The Transgender Studies Reader* (2006), edited by Susan Stryker and Stephen Whittle. This contains a number of articles written by those currently doing research into trans issues, including an article by Jamison Green, who’s autobiography is discussed in this thesis. One may also read, *Transmen & FTMs Identities, Bodies, Genders & Sexualities* (1999), by Jason Cromwell, which researches transmen’s experiences, transvestitism, as well as historical and cross-cultural aspects of trans issues. I have chosen not to go into great detail about other trans research because I want to focus on Halberstam and Prosser’s interactions with these ten autobiographies specifically.

I chose to use the theories of J. Halberstam²¹ and Jay Prosser because they are the only well known, published theorists that deal specifically with female-to-male transsexual

²⁰ Johnson et al. (1982); Martino, (1977)

²¹ I am aware that Halberstam now goes by the name Judith “Jack” Halberstam (<http://www.egomego.com/judith/home.htm>). For the purposes of this thesis I will use Halberstam as often as possible whenever referring to this theorist, however, since “Female Masculinity” was published under the name Judith I will use female pronouns whenever the constraints of the English language force me to do so. I will not use any of the newly created gender neutral pronouns (e.g. hir) because I do not know which pronouns Halberstam uses.

issues. Other theoretical literature is a review of these two theorists' work or focuses on male-to-female (MTF) transsexuals and transgender people. There are many theorists who write about transgender issues, but there are few who discuss male transsexuality as extensively as Prosser and Halberstam do. Therefore, they were my prime choices in assessing applicability of theory to the transsexual experience. Since these two theorists have focused so much on FTM transsexuality and/or transgenderism, then they should be able to inform people new to these concepts about these issues with well-founded theories. If they do not do so satisfactorily, when compared with reports of FTM experiences, whether biased on their own or not (to be discussed in chapter five), then a new theoretical perspective needs to be formulated that does.

2.1. USING AUTOBIOGRAPHIES AS EMPIRICAL MATERIAL

Autobiographies are an interesting source to use for research since they are not fact, but also not fiction, they blur the lines between these two concepts. B. Harrison and E. S. Lyon succinctly illustrate the difficulties with using autobiographies as a research material:

The contexts of the production of autobiography set boundaries for interpretation to the extent that autobiographical writing may reflect literary styles, private and public purposes, social context and possible audiences [...] autobiography and other personal narratives can then be seen as reconstituted 'fictions,' and may use fictional genres to present the self in particular ways to the audience. Thus in the use of all autobiographical documents [...] the 'public' for whom they are intended must be a fundamental reference point in attempts at understanding them.²²

Unlike interviews and focus groups, the researcher is not in charge of what information is collected from the participant and put down on paper. Instead, as Harrison et al. show, there are another set of deciding factors, including the editor's omissions and recommendations, publisher's requirements and the ability for an often non-professional writer to decide what information to include, exaggerate or recreate. The historical fact of autobiographies is of course unverifiable, however I agree with Jerome Bruner that the nature of one's identity is wrapped up in storytelling: "I persist in thinking that the autobiography is an extension of fiction, rather than the reverse, that the shape of life comes first from imagination rather than from experience."²³ He also states:

²² Harrison and Lyon, (1993) pg. 103

²³ Ibid. pg. 176

An autobiography is *not* and cannot be a way of simply signifying or referring to a 'life as lived [...] I take the view that there is no such thing as 'life as lived' to be referred to. In this view, a life is created or constructed by the act of autobiography.²⁴

One understands that while there are inaccuracies and embellishments in autobiographies, limiting the researcher's ability to take the narrative as fact, these same limitations are found in any recounting of life occurrences. Factual recording of a person's life may only be made, for example, in the setting of a continuous live-feed of a web camera, and even then our interpretations of a person's actions (not privy to their thoughts ourselves) already begin to skew our perceived reality into a recreation. Therefore, while I recognize that my empirical materials (i.e. the autobiographies) are inherently biased reproductions of events that I have no way of confirming factuality, they are still valid resources for understanding the way another person has perceived his life.

Some of the autobiographies were more difficult to read than others. In 1982 an autobiography was written by Chris Johnson, Cathy Brown and the reporter Wendy Nelson, *The Gender Trap The moving autobiography of Chris and Cathy, the first transsexual parents*.²⁵ Unlike the other autobiographies, this tells the narrative of two people who, as the title says, became the first documented, transsexual parents. One reason this book was more difficult to read was due to constant underlying gender assumptions made by the authors. For example, they strongly stress "sexual roles," by which they mean that Johnson (Chris), was a man because he was "career-minded and unmaternal," using his disinterest with pregnancy to substantiate his masculinity.²⁶ Instead of referencing to his inner male identity and leaving it at that, the authors feel the need to explain that Johnson was interested in traditionally male things, such as a career, and not in such "womanly things" as pregnancy. Therefore, since women are (arguably) no longer defined by their wombs and men are no longer stereotyped by disinterest in domesticity, these conceptualizations are dated. It was written in the third person, unlike the other books and makes a point of portraying Johnson as stereotypically masculine as a child. While other authors described themselves as tomboys, the authors of *The Gender Trap*, give the impression of pleading for sympathy from the reader. My personal interpretation is that due to the perceived un-accepting world of the mid-to-late-1900's England, the authors went to great lengths to make sure that their narrative was met

²⁴ Ibid. pg. 161 (emphasis in original)

²⁵ Johnson, et al. (1982)

²⁶ Johnson, et al. (1982) pgs. ii and 14

with sympathy. To this extent some descriptions may have been embellished to prove that Johnson was a vulnerable character.

I see autobiographies as important a resource as interviews are and they have become a valuable resource for sociological study. In *Telling stories : the use of personal narratives in the social sciences and history*, Maynes et al. state, "Sociological generalizations based on personal narrative evidence are claims that a given personal narrative illuminates a particular social position or social-structural location in society [...] and that it illustrates how agency can operate at this locus."²⁷ By reading all of the self-described FTM autobiographies published in English, I am illuminating the social position of these men in the UK and USA. Bernice Hausman also found autobiographies to be helpful in her research as they not only inform both the transsexual and non-transsexual reader:

...books by transsexuals about sex change hold a significant position in contemporary transsexual culture [...] thus, while transsexual autobiographies may not be representative of the experiences of many (or even most) transsexual subjects, they are indicative of the establishment of an official discourse (or set of discourses) regulating transsexual self-representations...²⁸

I will later discuss why I disagree with her insistence that transsexual autobiographies establish an official discourse that regulate how a transsexual sees himself, but I do agree that transsexual autobiographies are powerful tools in the non-transsexual's understanding of an unimaginable life, as well as the transsexual's understanding that he is not alone in his female-bodied experience.

Like an interviewee, the autobiographer relies on memories and decides what details to share, which to omit and which to redesign according to what he believes his audience will want to hear. Like an interviewer's demographics, body language and chosen questions, the autobiography is subject to a multitude of subtle influences that shape what information is given, how it is given and how it is interpreted. Unlike an interview, autobiographies have the ability to be contemplated over time, they are more thought out and less subject to impulsive statements. Therefore, for better or for worse, autobiographers can be more reserved with the information they share, unlike interviewees who unintentionally convey meaning with facial expressions or body language. Authors have more control over the

²⁷ Maynes, Pierce and Laslett, (2008) pg. 129

²⁸ Hausman, (1995) pgs. 142-143

information they choose to share than do interviewees. They are able to record their experiences at the time they are going on, instead of just relying on memory.²⁹ Like any transsexual narrative, the creation and presentation of an autobiography distorts what the man actually experienced, as do my own experiences when I read and interpret these men's stories. Despite this, these ten stories are valuable resources in understanding what these men have felt about their identities throughout their lives.

I take the narratives at face value, with the assumption that the authors have written truthful accounts of their experiences as they have perceived them. The narratives are used as representations of how each author has positioned himself in the world based on his experiences. The concepts of factuality and reality are highly debated, some could even argue that whether these narratives discuss events that actually happened or not is unimportant. However, I find it very important to be able to locate these narratives in the realm of subjective realities, those that are portrayed by the authors. Since the trans theorists themselves deal with these types of narratives as subjective realities, I must do the same in order to be able to assess the validity of their claims. Hence, this study does not aim to investigate an essentialist reality, but rather the subjective realities of the ten trans men specifically. Only then can a comparison be made between the claims of each theorist and the subjective realities portrayed by the authors. Therefore, despite the debate around this issue, throughout this thesis the narratives will be treated as subjective non-fiction, rather than fiction.

At the beginning of my research, I wanted to focus on the gendered title and pronoun usage in each man's story of his transition. I was interested in seeing whether he referred to himself as a little girl or boy, as a she or a he, as a mother or a father, and whether these titles and pronouns changed over the course of the book. However, as I began this research I realized that this investigation would not work, as many of the men wrote in first-person, narrative form, and often did not refer to themselves often as anything other than "I," or "me." I then changed my focus to look at theoretical relationships and comparisons to these autobiographical texts. Therefore, I read each of the autobiographies and took notes on what experiences the author described having. After reading half of the books, I began to see five

²⁹ Valerio (2006) wrote his autobiography over the course of several years and he used excerpts from his journals to help him recall his emotions and experiences at different times during his transition.

repeating themes which I later identified as focus areas of difficulty that each man told stories of to some degree or another, they are:

Focus 1: Trying to Fit into Female Roll/Body/World;

Focus 2: Discovering one is Trans/Coming Out;

Focus 3: Acquiring Hormones and Sexual Reassignment Surgery;

Focus 4: Trying to Establish/Re-establish a Confident Identity;

Focus 5: Romantic/Sexual Relationships

After identifying these five main focus areas that all the stories touched on to some degree, I went back and reread Prosser and Halberstam's texts. I was looking to see if their theories about transsexuality applied to these men's lives as they have reported them and if they did, to what degree. In other words, after identifying these focus areas that each man, to various degrees, spent time discussing in his book; I decided that this would be my tool to find out if the theorists were as applicable to understanding transsexuality as they presented themselves to be. My findings based on this research will be the subject of this thesis, as well as a discussion of what may be a more appropriate theory for FTM transsexual embodiment.

3. FTM TRANSSEXUAL THEORIES- MASCULINE WOMEN AND IDENTITY IN THE SKIN

Trans theory, while still new in relation to gender theory on whole, has a rich and diverse background.³⁰ Many, such as Susan Stryker, Stephen Whittle and David Valentine, among others, have published texts on their beliefs about what trans experience is.³¹ Both those who have a trans identity and those who do not, have given much thought to how our male-female divided world affects those who are not so clearly defined. My own addition to this research is based on the two theorists who discuss FTM narratives extensively, J. Halberstam in, *Female Masculinity* (1998) and Jay Prosser in, *Second Skins the body narratives of transsexuality*, (1998). I chose these particular publications (as opposed to later works by these theorists) because they had sections that focused specifically on FTM narratives, they both used at least two of the autobiographies I use in this thesis and they were published the same year. Therefore, I found them to be two theoretical frameworks that could be compared on several different levels. To reiterate, I have chosen to focus on Halberstam and Prosser because they are the two theorists who go into extensive analysis of FTM autobiographical narratives specifically. Other theorists focus their analysis on MTF experiences or on different empirical material. In order to better discuss how trans theorists interpret FTM trans narratives, I chose those theorists who produced the most material on that subject.

Both Halberstam and Prosser approach what it is to be a FTM transsexual in different ways. Halberstam writes from the perspective of a transgender butch individual and Prosser from the perspective of a FTM transsexual.³² These two author's perspectives most often disagree with each other, or they perceive transsexuality and transgender in very different ways. I will begin by introducing the theories of Halberstam and then Prosser, along with a critique of both theories, focusing especially on where there are specific points I find lacking. Following that, I will discuss which theory seems to be most substantiated by the autobiographies in this study using my five focus areas. Finally, I will discuss where there is need for a new theory.

³⁰ Stryker and Whittle, (2006); Valentine, David. (2007). *Imagining Transgender: An Ethnography of a Category*. Duke University Press. This is one of Valentine's publications, but as mentioned above the other works of Stryker, Whittle and Valentine were not applicable to my research. Stryker and Whittle's *Transgender Studies Reader* was used purely for background information.

³¹ Ibid.

³² Halberstam, (1998); Prosser, (1998)

3.1. J. HALBERSTAM

J. Halberstam approaches FTM transsexuality from the perspective of a lesbian feminist who has an understanding of transgender butch individuals. In her book she has a chapter in which she compares transgender butch women and FTM transsexuals. Overall, her theories about transsexuality are influenced by her belief that society needs to remove its gender classifications, as she views them as unnecessary and restrictive, a point of view that is valid for some of the autobiographer's in this thesis.³³ Halberstam states that if this were the case, then children would not have to grow up to be transsexuals, thus implying that transsexuality is culturally and socially constructed.³⁴ Halberstam asks, "Why in this age of gender transitivity, when many queers and feminists have agreed that gender is a social construct, is transsexuality a widespread phenomenon?"³⁵ Admittedly, as the quotation says, this may have been a naïve question, but she does not offer another version of it, implying that she is still asking this question. This is a naïve query, because it answers itself: If men are still undergoing hormones and surgeries to mark their bodies as unquestionably male, despite an age of "gender transitivity" (which does not exist to a great extent), then there must be another motivator than either social acceptability of masculine women or the ability to traverse genders.³⁶ There must be a more elemental component to identity that makes these men want to hormonally, physically and legally change their sex.

Halberstam believes that the reason FTM transsexuals decide to transition is because they are extremely masculine and feel they must have the bodies of men to comply with society.³⁷ This is problematic to her because she feels that SRS has social and political consequences, because women are then allowed male privilege:

The recent visibility of female-to-male transsexuals has immensely complicated the discussions around transsexuality because gender transition from female to male allows biological women to access male privilege within their reassigned genders.³⁸

³³ Beatie, (2008); Kailey, (2005); Paris, (2006)

³⁴ Halberstam, (1998) pg. 171

³⁵ Ibid. pg. 146

³⁶ Ibid. pg. 146 I say that we are not in an age of gender transitivity because many people are still very adamant that there are differences and boundaries between men and women and what they can and cannot do. I make this assumption because people become outraged over little acts of gender transitivity, as can be seen by the recent news reports (<http://www.foxnews.com/health/2011/04/11/j-crew-plants-seeds-gender-identity/>) expressing distress and disgust over a mother shown painting her son's toenails pink in a popular magazine. If we did in fact, live in an age of gender transitivity then this would have been a non-issue.

³⁷ Halberstam, (1998) pg. 144

³⁸ Halberstam, (1998) pg. 143

Instead of women destroying male privilege, they are simply changing their bodies to get it. Halberstam states that there are blurry lines between FTM identity and transgender butch identity. She believes that they are points on the same spectrum. In focusing on masculinity as a driving force towards SRS for FTMs, Halberstam forgets that transsexuality is more fundamental than that; the basic issue behind transsexuality is not intense masculinity but male identity, not how they portray maleness but that they are men. A man can be a man without being masculine and a woman can be a woman without being feminine. It is not how one enacts their gender but what their gender identity is felt to be.³⁹

Halberstam says that butch women choose to not have SRS, implying that FTMs could do the same.⁴⁰ Again, Halberstam misses the fact that FTMs do not feel they have a choice in the matter. They have a choice on how much SRS to have, but they do not choose to be men, they are men. They are simply doing what they can to make sure that others know that they are men. I agree with Halberstam's observation that FTMs do often have long periods between genders.⁴¹ This could be because they are testing if they do in fact have a male identity, or they have just started taking testosterone and people do not perceive them as male yet. However, these men still differ from transgender butch identifying persons because they are moving towards a more socially obvious male identity. They are men and will not feel their identity is visible until they reach a certain stage of SRS or until they themselves and other people perceive them as male. According to Halberstam, transgender butch individuals do not identify themselves as men, or at least not as men all of the time. They identify as non-gendered people or a variation of women, but not as men. As Halberstam describes transgender butch individuals, they do not feel that their identities' necessitate SRS or that people perceive them to be men, as FTMs do. Transgender butch is a good term for a group of people that are different from transsexuals. Some transgender butch people may later identify as FTMs but they may be comfortable with their identities in their female bodies.

Finally, Halberstam believes that "concrete distinctions between butch women and transsexual males [...] all too often serve the cause of hetero-normativity by consigning homosexuality to pathology and by linking transsexuality to a new form of

³⁹ Kailey, (2005); Stryker et al. (2006) Matt Kailey is a good example of a man who is not stereotypically masculine. He will be discussed in further detail in chapter five.

⁴⁰ Halberstam, (1998)

⁴¹ Ibid.

heterosexuality.”⁴² Again, this is an erroneous link because transsexuality is considered the pathology, since it is still listed as a psychological disorder. Transsexuality is as unrelated to homosexuality and heterosexuality as one’s biological sex is.⁴³ FTMs can be homosexual, heterosexual or queer. They need not conform to hetero-normative society. Their transitions are unrelated to whom they find sexually attractive, but instead to their identity as men. Prosser’s theories reinforce this statement and delve more deeply into what it is to be a FTM transsexual.

3.2. JAY PROSSER

Jay Prosser writes from the perspective of being a FTM transsexual himself. Whether this conflicts with his ability to analyze the trans experience objectively, I believe is irrelevant. When describing life experience, personal identity and embodiment, I believe objectivity is impossible and unnecessary. However, it is important to keep in mind that he does have a firsthand experience and therefore, vested interest in how transsexuality is perceived and conceived. Prosser focuses on two concepts to explain his theories on FTM transsexuality: Didier Anzieu’s theories on identity, stemming from outside the inner body, or “skin ego,” and the importance of narratives.⁴⁴ Describing “skin ego,” Prosser says:

Didier Anzieu suggests the body’s surface as that which matters most about the self. His concept of the ‘skin ego’ takes the body’s physical skin as the primary organ underlying the formation of the ego, its handling, its touching, its holding—our experience of its feel—individualizing our psychic functioning, quite crucially making us who we are. Bordering inside and outside the body, the point of separation and contact between you and me, skin is the key interface between self and others, between the biological, the psychic, and the social [...] The body is crucially and materially formative of the self. Anzieu’s means of demonstrating that all psychic structures stem from the body, the skin ego returns the ego to its bodily origins in Freud.⁴⁵

In other words, the skin is not only the border between the self and the outside world; it constructs what that self is. When considering transsexuality’s manifestation, one must consider several questions. What is identity based in, just the body or just the skin?⁴⁶ Or is it a mingling of the two, as Prosser suggests?⁴⁷ Is changing one’s outward appearance and the

⁴² Ibid. pg. 157

⁴³ Ibid.; Kailey, (2005); Stryker et al. (2006)

⁴⁴ Prosser, (1998) pg. 65

⁴⁵ Ibid. pg. 65

⁴⁶ Here I am using the word body to mean both the inner organs and the grounded perspective, the perspective with which one interacts with the world. Skin here, is used as the medium by which others interact with one, the seen casing of the body which may or may not reflect a person’s identity.

⁴⁷ Prosser, (1998) pg. 65

way one is perceived also changing identity? Or does identity stem from something else? Prosser states that “contemporary conceptualizations of sex make it difficult to believe that surgery, through the simple excision and restructure of body parts, can miraculously and wholly alchemize one sex into ‘the other.’”⁴⁸ Considering these complications, Prosser finds Anzieu’s concept of the skin ego helpful.

Derived from Freud’s description of the ego and id, Anzieu draws the origins of identity not as a “projected image [...but] ‘the projection of a surface’ as ‘*derived from* bodily sensations’ to represent the image of the body as derived from the feeling of the body.”⁴⁹ In other words, the identity is created by the feelings of the body, if the body feels a certain way, for example male, then the body will create a male identity. Prosser says, “When body image transforms fleshy matter and inscribes its struggle on the material body, it exteriorizes what is conceived as internal.”⁵⁰ Therefore, this male identity will in turn help the body to further render itself more male by using hormones and surgery to manipulate the body’s surface to better express itself.⁵¹ Prosser’s analysis of Anzieu is not as inclusive as he believes. It fails to include transsexuals who do feel at home in their skin and do not feel alienated from their bodies, but in need of augmenting them. Some of the men in the autobiographies I read described not having complete SRS because they felt they were comfortable in their bodies after a mastectomy.⁵² Prosser interprets Anzieu saying, “The body is crucially and materially formative of the self,” but if this were the case then how would this inner conviction of maleness reside within a female body? Some of the men in the autobiographies write that they were convinced of their boyhood even after recognizing their female bodies; therefore, the self must consist of more than the body. Prosser’s examples rely heavily on only one autobiography, that of Raymond Thompson who, describes intense alienation from his body.⁵³ Prosser states the following, “more dramatically than any other [...Thompson’s] autobiography substantiates this constative dimension of the image of entrapment in the wrong body.”⁵⁴ It is inappropriate for Prosser to generalize about how

⁴⁸ Prosser, (1998) pg. 63

⁴⁹ Prosser, (1998) pg. 65 emphasis Prosser’s

⁵⁰ Ibid. pg. 71

⁵¹ Ibid.

⁵² Beatie, (2008); Kailey, (2005); Paris, (2006)

⁵³ I tried, unsuccessfully, to find a copy of Raymond Thompson with Kitty Sewell’s *What took you so long? A Girl’s Journey to Manhood* (1995). Searching amazon.com and the University’s libraries I was unable to locate a copy and was therefore, sadly, unable to read it myself. Prosser also uses Martino and Rees’s books, but gives fewer examples from them compared to Thompson’s book.

⁵⁴ Prosser, (1998) pg. 69

FTMs feel about their identities and bodies by using most of his examples from an autobiography that he admits is more extreme than others. Although generalizations about FTMs are precarious (as experiences vary widely), patterns do emerge when one bases them on a wide range of narratives.

Prosser goes on to describe the importance of telling one's narrative to the formation of the transsexual's subjective interpretation of his identity, but he does so contradictorily. Due to the nature of SRS in Prosser's analyzed countries (USA and UK), transsexuals must first go through the "gate keepers," such as psychologists and other medical professionals, in order to be allowed to correct their bodies.⁵⁵ To facilitate passing through these gate keepers, letters of recommendation for SRS in hand, transsexuals learn to homogenize their experiences into a narrative that clinicians want and expect to hear.⁵⁶ Prosser cites the "wrong body formula" as an accurate but perhaps over used, description of the trans experience.⁵⁷ Transsexuals, Prosser says, learn the supposedly authentic transsexual story to convince doctors they are transsexual and deserve SRS, therefore Prosser says, "Being trapped in the wrong body has become the crux of an authenticating transsexual 'rhetoric.'"⁵⁸ Prosser confusingly continues by stating, "being trapped in the wrong body is simply what transsexuality feels like," implying that it is not just what doctors want to hear.⁵⁹ This may be the case (Hausman also reiterates this in her research on transsexual autobiography), and is often described as such by the authors of the autobiographies discussed in this thesis, however not all of them describe themselves as being in the wrong body, but that their bodies need some alterations.⁶⁰ Where are they in Prosser's explanation of FTM embodied self? Also, If Prosser finds that this "wrong body formula" is accurate, then I am unsure why he problematizes the gate keepers' need to hear this phrase before prescribing SRS. Again he uses Thompson as his example.⁶¹

The narrative is a tool not only used in the doctor's office to convince another of a trans identity, Prosser says, but also in the autobiography format. Due to the hidden and

⁵⁵ Ibid.

⁵⁶ Ibid.

⁵⁷ Ibid. pgs. 67-68

⁵⁸ Ibid. pg. 69

⁵⁹ Ibid. pg. 69

⁶⁰"All of this suggests that transsexual autobiographies serve to encourage and enable transsexual subjects to conform to the parameters of an established 'transsexual personal history' in order to obtain the desired medical treatment." Hausman, (1995) pg. 143. Beatie, (2008); Kailey, (2005)

⁶¹ Prosser, (1998) pgs. 69-70

easily misunderstood nature of transsexuality, Prosser says that autobiographies are used to make identities concrete. Since the identity is felt by the transsexual but not always seen by outsiders, FTMs feel that by explaining their identity in narratives, they can show what is hidden and make people understand their experiences.⁶² This seems to be a fairly appropriate explanation, as all of my autobiographers write about being motivated to educate others with their books.⁶³ As can be seen by the above, Prosser and Halberstam have two very different approaches to transsexuality. Again, Prosser approaches it from the perspective of an FTM himself and Halberstam approaches it from the perspective of a transgendered person. Their perspectives often disagree with each other. The following will introduce the ten autobiographies that I used as my empirical resources, and then discuss the five focus areas. During the analysis of these autobiographies, I will discuss how Halberstam and Prosser's theories interact with what these men have described in their narratives.

⁶² Prosser, (1998)

⁶³ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

4. “ABOUT A BOY”-TRANSSEXUAL NARRATIVES

All ten autobiographies were very interesting to read. They varied in length, literary quality and focus. Some autobiographers were more informational about transsexuality and transition in whole, with examples from their lives and recommendations and resources for future men like them. Other autobiographers were more personal, a recounting of life stories from childhood through transition. See Figure 2 for a brief overview of each man, the Figure shows that the autobiographers came from different backgrounds and different countries.

Figure 2: Demographics

	Copyright Date	Nationality/Ethnicity	Birth Year	Sexuality
Martino	1977	Italian-American	late 1930s	Heterosexual
Johnson	1982	British	1949	Not constant
Rees	1996	British	1942	Heterosexual
Green	2004	American	Ca. 1949	Heterosexual
Kailey	2005	American	Ca. 1956	Homosexual
Valerio	2006	½Hispanic ½Native American	1957	Heterosexual
Cummings	2006	Cuban-American	Unknown	Heterosexual
Paris	2006	British	1962	Unspecified
Khosla	2006	½ German ½ Indian American	Ca. 1970	Heterosexual
Beatie	2008	American	1974	heterosexual

They published their narratives across a long span of time and were born over the course of four decades. Each man’s story is different from the next, despite the fact that they are all writing about their female-to-male transitions. However, some similarities can be found in relation to how they describe their lives and transitions. The first grouping of

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autobiographers can be found in Mario Martino, Chris Johnson and Mark Rees, who were all born prior to the 1950's and published their work in the last century. They all write about sex in a very concrete way, one is either man or woman, there is no room or comprehension of anything in between. None of them ever really identified as a lesbian, the idea of being a lesbian was almost as distant a concept to them as transsexuality. These autobiographies discuss transition and embodied transsexuality the way Prosser does, in fact Prosser analyzed both Rees's and Martino's texts in his book.

The next group is that of Jamison Green, Max Valerio, Mark Cummings and Dhillon Khosla. These men published their books in the 21st century. Green, Valerio and Khosla all live in California (Cummings seems to come from the mid-west in the USA not far from San Francisco, where they describe a large FTM community residing. For a time, Green ran a popular support group for FTMs in the San Francisco area. They all write that they described themselves as a lesbian for a long time. Green and Cummings even describe that they had long, committed relationships with their lesbian partners. Khosla to some, and Valerio to a great extent were (and at publication still are) feminists and engaged in the lesbian feminist community. However, these men record that when they recognized transsexuality as the reason for their disquietude over the years, they all were very desperate to begin their transitions. Except for Valerio, due to lacking financial stability, they all had extensive SRS and describe being very confident in their manhood at publication. This group of men substantiates much of what Prosser says despite the fact that their books were published after *Second Skins* was.

The third group, consisting of Matt Kailey, Rico Paris and Thomas Beatie wrote different narratives from the rest of the men. Kailey and Paris had long, heterosexual marriages before getting diagnosed with GID. Paris even had four biological children. Both of these men felt at a disadvantage when beginning their transitions or visible manhood, because they were not socialized as men and they write that they are much more comfortable describing themselves as transmen, than men.⁶⁴ Neither of them live in an area where there are strong FTM support networks, although Paris describes creating his own. Paris writes, "I had always felt that I should have been born a male," when coming out to his mother, but does not describe his masculinity the same way as the other men, and describes himself not as

⁶⁴ Kailey, (2005); Paris, (2006)

a man but a transman.⁶⁵ Beatie is quite unique from the rest of the men because in his narrative he seems confidently decisive about the gender confusion he caused when he stopped his testosterone injections to conceive a child. All of the other men describe some discomfort with their female reproductive and sexual organs, but Beatie tells the reader he is comfortable enough with his body after a mastectomy to carry a child for nine months. Johnson also carried his child after recognizing his transsexuality but he says he did so with great discomfort and it was prior to his transition. Beatie, however, is still clear about his sex identification. He states, “I was a man before I gave birth, I was a man during my pregnancy, and I am a man now [...] I am a man who was capable of carrying a child, and I did just that.”⁶⁶ However, he also states that his transitional changes were:

...convenient ways to strengthen my image of myself, and to make it easier for me to adapt in a world that defines gender strictly. There were two further steps I could have taken, and chose not to: surgically removing my female reproductive organs, and surgically constructing a penis. But I didn't feel that either step was necessary for me to feel any more like a man.⁶⁷

These two statements seem contradictory, one saying that he is undoubtedly a man, the next that he transitioned to make it easier for him to live in a binary gender system. Therefore, despite writing this assurance that he is a man, I place him in this third group because he admits, as Halberstam would agree, that there is a societal influence to his decision, which the previous group's men do not. In this way, these last three men's narratives exemplify Halberstam's way of understanding transsexuality.

⁶⁵ Paris, (2006) pg. 54

⁶⁶ Beatie, (2008) pg. 308

⁶⁷ Ibid. pg. 7

5. FTM'S FIVE FOCUS AREAS FOUND IN THE AUTOBIOGRAPHIES

While reading each man's autobiography, I identified five thematic focus areas, or struggles that all the men write about in their narratives, to some degree, during their lives. They describe these struggles as being caused by many factors, including but not limited to, national law, societal mores and medical practices and beliefs. In this section I will introduce and discuss each struggle as I have identified them. They are:

1. trying to bring the female bodied man's life into accord with his female socialization;
2. discovering he is transsexual and coming out;
3. hormones and surgery;
4. trying to establish or re-establish a male identity;
5. romantic and sexual relationships

All of these five focus areas are made difficult by the aforementioned structures and each man describes struggling with these experiences. The degree to which they say they struggled or chose to describe struggling, was usually influenced by time period (1960s vs. 2000s), personal and familial beliefs about gender (strict binary gender system vs. malleable gender identity), financial assets (employed with a good salary vs. unemployed with very little money) and country of residence (USA vs. UK), among many other demographic factors. Some of these factors or variables are easy to identify, as this list shows; however, there may be countless other variables that affected the creation of each man's written narrative, that are harder to identify. For this reason, I state here that I recognize I am unable to engage every factor that has contributed to each man's reported struggle. That said, I have chosen these specific focus areas as they are more easily correlated to the FTM experience described in these narratives.

As each man described these focus areas, they seem to be crucial to their FTM transition. Therefore, theorists describing these transitions must engage these struggles in order to clearly illustrate the transsexual narrative. If they do not, then the conclusions that Prosser and Halberstam come to are lacking and therefore, less than applicable when understanding the transsexual narrative. These five focus areas are the tool that is used to engage Prosser and Halberstam's theories. The following analysis will describe each focus

area, giving examples from the autobiographies ending with a discussion about how the theorists engage (or do not engage) this focus area and what can be added to a new theory, in order to be more applicable to understanding the FTM transitional experience.

5.1. FOCUS 1: TRYING TO FIT INTO FEMALE ROLL/BODY/WORLD

The first struggle I identify from the narratives is the hardship of fitting into a body, role and social self-perception that was female and therefore, incongruent with these men's reported feelings of identity. Figure 3 shows the number of men who wrote about the knowledge of being a little boy early in life and what he felt towards his female anatomy.

Figure 3: Focus 1: Trying to fit into female roll/body/world

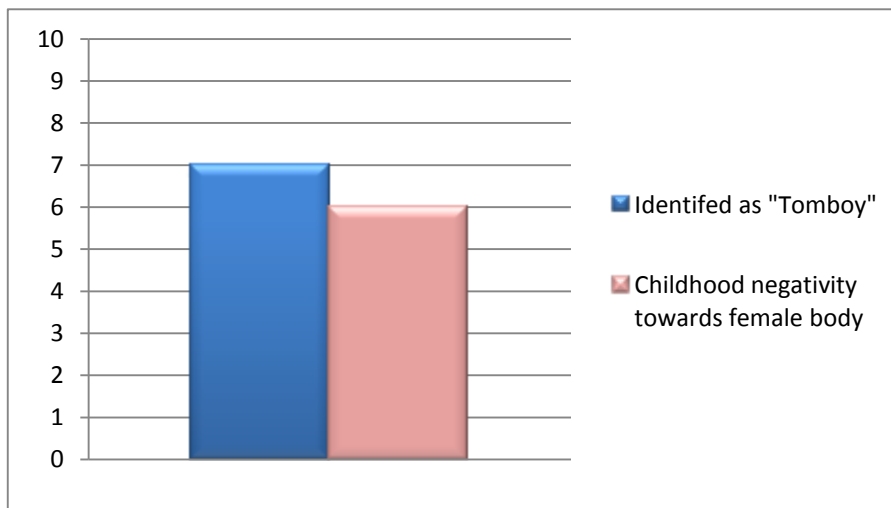


Figure 3 shows that the over half of men described having some difficulty growing up in a female body and feeling more at ease with masculinity. The two-thirds who discuss their bodies during childhood and puberty, felt negatively towards their bodies. Those who felt neutrally about their female bodies are the men who describe feeling more transgender than transsexual (i.e. Kailey, Paris and Beatie).⁶⁸ These are the men that would either describe themselves as a gender marker X, instead of F or M, or as a transman. Since Beatie had a baby after changing his outward gender, it is safe to say he feels differently about his female organs than the other men. The men who felt negatively towards their female bodies, especially at puberty, describe themselves as men, not transmen.⁶⁹

⁶⁸ Beatie, (2008); Kailey, (2005); Paris, (2006)

⁶⁹ Green, (2004); Johnson, et al. (1982); Khosla, (2006); Martino, (1977); Rees, (1996); Valerio, (2006)

The degree to which each man described being forcibly socialized as a girl depended on when he was born, among other factors, such as parental beliefs about gender. Martino and Rees described having the most trouble as children and young adults growing up in the 1940s and 50s in the US and UK.⁷⁰ Martino remembers working in the garden happily with his father:

Pa liked to work without his shirt. Naturally, I did too. Because Pa did. Everything he did I aped—even to the way he hitched up his jeans. And then, suddenly one day in my ninth summer, he looked at my bare chest a second time and roared out at me: ‘Go home! And put some clothes on!’⁷¹

This was one of the first inclinations Martino received that he was not like his father, not a man and he had to live by different rules. He has pictures of himself at different ages in his book, with descriptions of how he would have looked better and felt more comfortable in men’s clothing. For Martino, Johnson and Rees, their youth was spent in a time period where clothing was highly gendered.⁷² Johnson seems to have kept his head down and avoided conflict about clothing, since he wanted to protect his parents from his dangerous male thoughts.⁷³ Rees describes clothing as a constant conflict between himself and the world. He dreaded going to formal events and often missed out, avoiding them and the formal dresses he would have had to wear. He worried, “Could I forever make feeble excuses for missing functions without being seen as very aloof?”⁷⁴ His androgynous clothing style made him the object of teasing, gender confusion, and was a constant source of conflict between him and his parents. He recalls that his mother thought he was simply being “cussed” or stubborn, about wearing masculine clothes and had no sympathy with him concerning the cruel remarks that others sent his way.⁷⁵ He says, “Even in the hottest weather I scorned dresses and sweltered in the more masculine but officially acceptable alternative winter uniform of skirt, shirt and tie, often wearing a blazer too.”⁷⁶ After puberty he refused to wear a bra for many years.⁷⁷ For both Martino and Rees clothing was, to say the least, a difficult issue.

All but Green and Cummings, who do not describe their childhood to great detail, describe themselves as a “tomboy,” liking to play with boys or playing traditional boys’

⁷⁰ Martino, (1977); Rees, (1996)

⁷¹ Martino, (1977) pg 11

⁷² Johnson, et al. (1982); Martino, (1977); Rees, (1996)

⁷³ Johnson, et al. (1982)

⁷⁴ Rees, (1996) pg. 64

⁷⁵ Ibid. pg. 16

⁷⁶ Ibid. pg. 14

⁷⁷ Ibid.

games.⁷⁸ Kailey states that he was not a tomboy, but that is the extent to which he discusses his childhood.⁷⁹ Some of the men refer to feeling “cursed” with a female body.⁸⁰ They felt that they had been wronged by God or biology for something, and were being punished by not being given the male body they should have had.⁸¹ Khosla grew up in Heidelberg, Germany and remembers being physically moved from the boys’ side of the gym to the girls’ while his male friends whispered, “they’re putting *him* with the girls.”⁸² Puberty was traumatic for most of the men, menarche (onset of menstruation) and having to buy and wear a bra were unavoidable realizations that they would not in fact, grow up to be men as they had hoped.⁸³ Still some found ways to make themselves feel more masculine on the outside. Martino used a douche nozzle between his labia to simulate a penis; he had identified with Christine Jorgensen in 1952 when the news about her ground breaking SRS was in the newspapers of his home town.⁸⁴ He learned that this identity would be unaccepted by his family, because his father immediately started to deride Jorgensen.⁸⁵

Rees turned to God for hopes of a sex change, at his confirmation he prayed that he would be changed into a boy.⁸⁶ He also drew pictures of himself as “a man in white tie and tails,” hoping that he could grow up to be one; at age ten he believed that all little girls wished this and by age fifteen he knew he had to get a sex change but had no information whatsoever about transsexuality and doctors told him SRS was impossible.⁸⁷ All of this worry and discomfort with his body is what lead him to end up in a psychiatric hospital for a short time. Valerio was outraged one evening when his mother told him he could grow up to be Miss America, when instead he wanted to grow up to be a soldier like his father.⁸⁸ Valerio realized “something [was] wrong” at a young age; he felt “male,” and drew pictures of himself as a male singer.⁸⁹ He even went as far as to refer to himself as “he” in high school

⁷⁸ Beatie, (2008); Cummings (2006); Johnson, et al. (1982); Khosla, (2006); Martino, (1977); Rees, (1996); Valerio, (2006)

⁷⁹ Kailey, (2005)

⁸⁰ Cummings (2006); Johnson, et al. (1982); Kailey, (2005) pg. 14; Khosla, (2006); Martino, (1977); Paris, (2006)

⁸¹ Cummings (2006); Johnson, et al. (1982); Martino, (1977); Rees, (1996)

⁸² Khosla, (2006) pg. 17 emphasis mine. Khosla and Cummings both spent part of their youth in a country other than the US or UK

⁸³ Beatie, (2008); Cummings (2006); Khosla, (2006); Paris, (2006); Rees, (1996); Valerio, (2006)

⁸⁴ Martino, (1977) pg. 40 Jorgensen was the first widely publicized American MTF to get SRS. She went to Denmark to have her surgeries and was open about her transition.

⁸⁵ Martino, (1977)

⁸⁶ Rees, (1996)

⁸⁷ Ibid. pg. 6

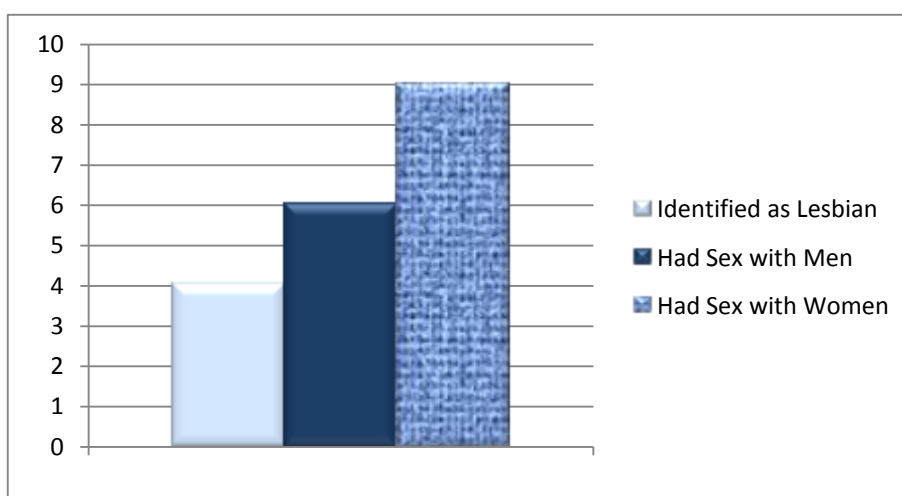
⁸⁸ Valerio, (2006)

⁸⁹ Ibid. pg. 50

and refused to wear a bra.⁹⁰ Paris and Beatie both described themselves as rambunctious and boyish in childhood, but both tried female modeling careers as teenagers at the encouragement of their parent(s).⁹¹ Neither of them continued modeling very long and Beatie said that he knew it was not for him, particularly hating the make-up and female clothing.⁹²

As far as relationships prior to transition (Figure 4), two-thirds of the men were attracted to women from early on (excluding Kailey who was attracted to men, and Johnson and Beatie who both realized their attraction to women later on).⁹³

Figure 4: Focus 1: Trying to fit into female roll/body/world



Some men identified as lesbians but felt that instinctively their partners were really heterosexual women.⁹⁴ Some did not know that loving a woman as a person with a female body was possible; Beatie did not know that two women could love each other sexually, until a school trip to France.⁹⁵ Martino had to keep his attraction and liaisons with women a secret; at one point he was asked to leave his convent school because they found out about his relationship with another girl.⁹⁶ It was the same case for Rees, who received a “medical discharge” from the Women’s Royal Navy (WRN) because of his attraction for another

⁹⁰ Ibid. pgs. 53 and 55

⁹¹ Beatie, (2008); Paris, (2006) Beatie’s father encouraged him to start his modeling career to help him get over his mother’s suicide. Both of Paris’s parents encouraged his modeling career.

⁹² Beatie, (2008); Paris, (2006)

⁹³ Cummings (2006); Green, (2004); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

⁹⁴ Green, (2004); Khosla, (2006); Valerio, (2006)

⁹⁵ Beatie, (2008)

⁹⁶ Martino, (1977)

woman.⁹⁷ Four of the ten men were married to at least one man before their transition.⁹⁸ Three of the ten men did not have sex with men prior to their transition.⁹⁹ For Valerio, Khosla and Beatie, who came out as attracted to women during a time and in an area where they could find support, lesbian groups were very crucial to their young adulthood.¹⁰⁰ Valerio and Khosla both live in the San Francisco area at publication and throughout their narratives. They found many friends among the lesbian groups there. Beatie, in Hawaii, found groups as well and all three were active in their communities.

Seven of the ten men refer to having felt masculine when having sex with either male or female partners and how they were either not aroused or did not enjoy their partners stimulating their (the men's) female body parts (breasts, vagina, clitoris).¹⁰¹ Of the men who identified as lesbians, they eventually realized that this was an inaccurate description and, either before or after transition, identified as heterosexual males. Paris and Beatie both recall being raped by past boyfriends. Paris was raped and beaten by more than one of his boyfriends during the time when his father had kicked him out of the house.¹⁰² He also describes sex with his ex-husbands as a duty that he had to perform. Beatie's one sexual relationship with a man was long term and with his karate instructor, who was much older. He never says the sex was consensual (and regardless, in legal terms he was underage), only that he let Ron do what he wanted, so that Beatie could learn karate to protect himself from his abusive father through Ron's instruction. Ron raped Beatie multiple times throughout their relationship.¹⁰³

5.1.1. FOCUS 1-THEORY VS. NARRATIVE

Halberstam

Based on Halberstam's female masculinity theory, one would say that these men are not the ones that need to change, but it is society that must accept and nurture these more masculine girls as children. Halberstam asserts that society must welcome masculinity from little girls, if that is how they choose to express themselves; "We might do well to work on other formulations of gender and body, right body, and right gender to provide children...queer

⁹⁷ Rees, (1996) pg. 67

⁹⁸ Cummings (2006); Johnson, et al. (1982); Kailey, (2005); Paris, (2006)

⁹⁹ Green, (2004); Martino, (1977); Rees, (1996)

¹⁰⁰ Beatie, (2008); Khosla, (2006); Paris, (2006); Valerio, (2006)

¹⁰¹ Cummings (2006); Johnson, et al. (1982); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

¹⁰² Paris, (2006)

¹⁰³ Beatie, (2008)

cross-identifying children, with futures and bodies that seem habitable.”¹⁰⁴ Using Halberstam’s theories, one could say that it is not the feeling of a male identity that compels these men to transition to visible manhood, but the inability to fight society’s non-acceptance of female masculinity or “bodies that fail to integrate.”¹⁰⁵ Halberstam also perceives that:

...sexual and gender identities involve some degree of movement (not free-flowing but very scripted) between bodies, desires, transgressions, and conformities; we do not necessarily shuttle back and forth between sexual roles and practices at will, but we do tend to adjust, accommodate, change, reverse, slide and move in gender between moods and modes of desire.¹⁰⁶

One might interpret these men’s narratives as having this sexual and gender movement; for example, some of the men had committed lesbian relationships before transitioning, found their transsexual identities later in life or in Beatie’s case, transitioned and then had a child.¹⁰⁷ However, Martino, Rees and Valerio describe themselves as male from early childhood, there was no description of identity transition.¹⁰⁸ Confusingly, Halberstam also recognizes that the male identity can be a constant, as in her discussion of the FTM boy, Fredd. Halberstam states what Fredd’s doctor conveys to him:

...transsexualism as a [move...] from one state to another, from one gender to another. [But] Fredd rejects such a rhetorical move and insists that his expression of his boy self is not a transition but rather the expression of a self that he has always inhabited.¹⁰⁹

It would seem that Halberstam then does discuss what Martino, Rees and others have described of their consistent male identity. But she is unclear and does not reconcile this latter view point with her former. Based on his narrative, Beatie does not perceive himself as becoming a woman again just because he had a baby, and would not necessarily describe his sexual and gender identity changing significantly since he says, “my gender is constant—I am a male. Even when I was a female, I identified with the male gender—and once I transitioned to a male, and was granted legal status as a male and husband, there was no

¹⁰⁴ Halberstam, (1998) pg. 171

¹⁰⁵ Ibid. pg. 147

¹⁰⁶ Ibid. pg. 147

¹⁰⁷ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

¹⁰⁸ Martino, (1977); Rees, (1996); Valerio, (2006)

¹⁰⁹ Halberstam, (1998) pg. 165

turning back.”¹¹⁰ Although, as previously stated, he agrees with Halberstam that there was a societal motivation for his transition.

Halberstam cites two of the autobiographies discussed here, Martino’s *Emergence* and Rees’s *Dear Sir or Madam*.¹¹¹ Of Martino, she says that he is haunted by lesbianism that he tends to “overemphasize the differences between butch womanhood and transsexual manhood.”¹¹² However, in Martino’s narrative these were two different things, he did not identify as a woman, even a butch woman. He knew himself to be a man who had a female body before SRS.¹¹³ Halberstam is also critical of Rees saying that he “obsessively marks out his difference from lesbians.”¹¹⁴ Rees however, did not believe himself to be a lesbian at any time during his narrative. Halberstam seems to argue that Rees does not know what his identity is, and although this may be true, he is in a better position to talk about his identity than Halberstam is. Halberstam seems to forget that being a lesbian was also stigmatized in society for both of these men.¹¹⁵ It is understandable that both of them, not identifying as lesbians, would want to differentiate themselves from women who identify as women attracted to women, not out of prejudice as much as clarity. Halberstam worries that male transsexuality will reconsolidate the dominate masculinity; this I believe colors her perception of transsexual identity.¹¹⁶ She does not see them as individuals trying to live according to their own perception of their identities, but rather as group threats to women’s liberation.

Halberstam’s theory seems to say that these men are weak, that they fall under the pressure of society to become men, instead of being proud of their masculinities as women.¹¹⁷ However, Halberstam’s theory does not explain why, if one is bowing under the pressures of society’s stigma of masculine women, one would choose an arguably, more stigmatized identity. There is more risk to personal health by embarking down the road of SRS, through surgeries or hate crimes; the transsexual is more vulnerable than he would be if he had stayed a visible woman. If Halberstam’s theory were an accurate description of FTM’s under the

¹¹⁰ Beatie, (2008) pg. 308

¹¹¹ Ibid. pg. 155

¹¹² Ibid. pg. 155 quoting Martino

¹¹³ Martino, (1977)

¹¹⁴ Halberstam, (1998) pg. 155 quoting Rees

¹¹⁵ Martino, (1977); Rees, (1996)

¹¹⁶ Halberstam, (1998) pgs. 143-144

¹¹⁷ Ibid. pg. 144

pressure of society to conform, would there not be more masculine women forcing themselves to be more feminine and woman identified, instead of taking the extreme, and more difficult journey of becoming outwardly visible men? Also, she is unclear about whether she sees sex and gender identity as a possible constant for some people or as a transitory shifting field for everyone.¹¹⁸

Prosser

Prosser's take on transsexuality is heavily based on the concept of the "skin ego," and on the man believing his female body to be wrong. The autobiographies used in this research reinforce that sex and identity are more than just skin deep. Throughout the autobiographies, several of the authors adamantly state that they were always male, they simply had to change their skin to match their subjective identity.¹¹⁹ Therefore, one cannot say that identity is just what these men see in the mirror or how others interact with them but something more fundamental. As stated previously, Prosser describes how the medical field wants to hear this description in order to allow SRS, implying that it is not necessarily an accurate feeling for all men, but something they learn to say. Then he goes on to say that, "the wrong-body formula is used by transsexuals themselves to express the sensory experience of transsexuality."¹²⁰ Again, it is unclear whether he agrees with this "wrong-body formula" or not. However, the "wrong-body formula" is an accurate description for the way some of these men describe themselves.¹²¹ They did grow up feeling like they should have been boys, that their anatomy should match a man's and not a woman's. The discomfort that many of the men felt growing up with their female anatomy is quite clear in their texts. However, as I discussed previously, and as can be seen in Figure 3, there are some men who did not feel trapped or disgusted by their female bodies. Beatie knew himself to be male, but felt comfortable enough to keep some of his female anatomy, as did several of the other men. Although an ongoing hardship, not all of the men describe traumatic disconnections from their bodies.

Discussion

In short, Halberstam suggests, contradictorily, that sex and gender identity is both fluid and changeable, as well as something that is consistent. Prosser tells his readers contradictorily,

¹¹⁸ Ibid.

¹¹⁹ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

¹²⁰ Prosser, (1998) pg. 67

¹²¹ Cummings (2006); Johnson et al. (1982); Khosla (2006); Martino (1977); Rees (1996); Valerio (2006)

that growing up as a FTM transsexual can be described as a “wrong-body” experience, but that this is also what a FTM is supposed to tell a doctor, not necessarily what is actually felt. It is the difficult task of defining what identity and an embodied self are that cause these theorists so much confusion. None of these men experienced their youths as female-bodied little boys the same way, just like no two individuals from any subgroup experience life the same way. However, this does not mean that a general understanding of FTM youth or pre-transsexual realization is impossible.

Combining both Prosser and Halberstam in the context of these ten autobiographies, I conclude that identity formation for some people can be much gendered, some of the men grew up knowing: I am boy, I run and play and dress like other boys. Identity can also be focused on other traits and not be as defined by gender as in: I am myself; I play and act according to the things I like and the things I do not like. Those who describe a more gendered identity are not necessarily the men who grew up in the 1940s and 50s; some of the men who came later also clearly state an early male identity. For the others, they saw themselves as child.¹²² They played with the toys given to them and with other children, they saw themselves as future adults, not describing clearly women or men. Paris and Beatie engaged in female modeling careers, whether they enjoyed it or not, they did not fight against such gendered activities, as Valerio did when his mother suggested he could be Miss America.¹²³ Halberstam is helpful in suggesting that children be allowed to express gender how they feel comfortable expressing it, whether with I am boy or I am child.¹²⁴

5.2. FOCUS 2: DISCOVERING ONE IS TRANS/COMING OUT

The next struggle identified in these autobiographies is discovering one is trans and then coming out to friends, family and even general society. To know if he is transsexual, the man must first have an idea of what that concept means, no small feat for Martino, Johnson and Rees who were dealing with these struggles prior or just when, the concept of transsexual was becoming known to the general public and medical fields.¹²⁵ Without even a name to call themselves, these pioneers had to strike out and look for information wherever it might be found. They hoped that they were not alone in their confusion or discomfort. As mentioned

¹²² Beatie (2008); Kailey (2005); Paris (2006); Green (2004) does not discuss his childhood to a great extent

¹²³ Beatie, (2008); Paris, (2006); Valerio, (2006)

¹²⁴ Halberstam, (1998) pg. 171

¹²⁵ Johnson, et al. (1982); Martino, (1977); Rees, (1996)

in the previous section, most of these men knew that they were men, different, or at least not women very early on in their lives.

Specifically, Martino, Rees, Green, Valerio, Khosla and Beatie all described knowing they were not girls or resisted girlish things at a very young age.¹²⁶ Paris did not discover his feelings of difference until his teens, Johnson until he met his future partner and Kailey and Cummings did not recognize their feelings of difference until their thirties.¹²⁷ Once these men recognized their feelings, most of them realized they were something other than woman and the descriptive term of transsexual made more sense to them. They all chose to come out to the people closest to them, and usually these people, due to their love for the man, tried to be accepting, even if they did not succeed in understanding the transition. Martino and Beatie's fathers refused to accept their sons' transition, or to recognize them as sons. Kailey, Johnson, Cummings and Paris all had difficult relationships with their parents due to their transsexuality.¹²⁸ Valerio's feminist lesbian friends were uncomfortable with his transition.¹²⁹ Self recognition of transsexuality, accepting that identity, explaining it to loved ones and having them accept that identity was difficult for all of the men. They started transitioning at different ages ranging from twenty-four (Beatie) to forty-two (Kailey).¹³⁰ One pattern that emerges is that the people who transitioned more recently, did so in a time period where more information about trans-issues was available. Perhaps giving hope to the future that this struggle is already becoming easier to manage, just by the mere fact that transsexuality is now far from being an unknown. It is far from being understood, but at least many young adults can now easily do a private Google search to find some information on why they feel differently from their peers.

The men had to find information where they could with the hope that the source was accurate and unbiased. Martino heard early on in his life about Christine Jorgensen but immediately heard the negative reaction from his father about her transition, "his jokes seemed crueler even than the others one heard everywhere."¹³¹ However, this was a crucial

¹²⁶ Beatie, (2008); Green, (2004); Khosla, (2006); Martino, (1977); Rees, (1996); Valerio, (2006)

¹²⁷ Cummings (2006); Johnson, et al. (1982); Kailey, (2005); Paris, (2006);

¹²⁸ Cummings (2006); Johnson, et al. (1982); Kailey, (2005); Paris, (2006)

¹²⁹ Valerio, (2006) pg. 163 Valerio put much more emphasis on his friends as his support group than his parents and therefore, discussed them more.

¹³⁰ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

¹³¹ Martino, (1977) pg. 40

moment for Martino, a realization that “*there were people like me.*”¹³² It was not until her book came out in 1967 that he learned the term transsexual and had a name to call himself.¹³³ Johnson and his partner had to search everywhere for information on what options were available to them and doctors told them about possible transition but required their secrecy or they would refuse treatment.¹³⁴ Since they did not know that transsexuality was not unique to them, they worried about their daughter’s mental health, thinking that having transsexual parents would somehow harm her, and the popular media and health professionals did nothing to alleviate their fears.¹³⁵ They, Johnson and his transsexual girlfriend, lived “with the belief [...] that society had them under close scrutiny from [...] start of transition] onwards and the smallest mistake could leave them open to hostility and suspicion.”¹³⁶ This fear is what kept Johnson from telling his family of his transition.

Rees was told for years that he could not transition and that he would have to learn to live and be happy with his female body. It was not until he was at the psychiatric hospital that someone gave him an article about a transsexual and he learned that he was not the only one.¹³⁷ By the time Kailey and Cummings were looking for answers to their masculine feelings, they were able to go to a doctor and be diagnosed with Gender Identity Disorder (GID). Whether the medicalization of transsexuality is positive or negative is an issue of much debate, however these men were at least able to go to a doctor and get information on others that had similar experiences.¹³⁸ The rest of the men who published did not have to look as hard for information about transsexuality. Again, this seems to provide hope for the future, as access to information about transsexuality is a step towards relieving the transsexual’s burdens. However, widespread information could simply reinforce a generic transsexual narrative as Prosser argues.

Once these men realized they were transsexual and that they were ready to do something about it, they started telling people. For all of the men this was a difficult process; however, for the earlier men (those that published before 2000) it was even more difficult, because again they had to explain the concept as well as their identification with it. Some

¹³² Ibid. pg. 40 emphasis his

¹³³ Ibid.

¹³⁴ Johnson, et al. (1982)

¹³⁵ Ibid.

¹³⁶ Ibid. pg. 148-149

¹³⁷ Rees, (1996)

¹³⁸ Kailey, (2005)

families had harder times than others accepting that they did not have daughters, sisters and mothers but sons, brothers and fathers. Martino, Johnson, Kailey, Cummings and Beatie either had no relationship with their parent(s) after disclosure or at publication have one that they do not describe positively.¹³⁹ It must be kept in mind however, that Martino and Beatie did not have positive relationships with their fathers prior to their disclosure. Johnson did have a good relationship with his parents, but due to the way they found out about his transition, via the media, their relationship was understandably strained. Kailey and Cummings were both very negative about the parent-child relationship and do not clearly state the particulars of how they disclosed their transitions or what their parent's reactions were.¹⁴⁰ Kailey mentions that "some relationships do not survive" coming out as transsexual, however he does not say whether this is what happened to him.¹⁴¹

On the other hand, Rees, Green, Paris, Valerio, and Khosla all managed to continue their relationships with their parents after they came out¹⁴². Rees's mother had a hard time with it, but in the end became one of his biggest supporters. His sister was originally supportive but ended up legally removing his rights to see her children due to his identity.¹⁴³ Green's father died before he had transitioned, but had gotten over his homophobia when Green had come out as a lesbian earlier in his life. Green's mother had a hard time accepting the transition and for a long time called him by his female name. However, they remained in communication. The rest of his family was very accepting.¹⁴⁴ After his death, Paris learned his father had struggled with his secret bisexual identity for years; this led Paris to come out to his family and four children. His mother and siblings had a hard time accepting it, and he feels he "could have handled telling [his] children better," but they seemed accepting of his transition.¹⁴⁵ Valerio's father seemed to take it in stride and ended up giving him advice on the matter, "You'll have to earn money like a man now," while his mother asked, "Why couldn't you just stay a lesbian?" and forbade him from going to her Native American reservation again.¹⁴⁶ Finally, Khosla's mother and father demonstratively made an effort to be

¹³⁹ Beatie, (2008); Cummings (2006); Johnson, et al. (1982); Kailey, (2005); Martino, (1977)

¹⁴⁰ Cummings (2006); Kailey, (2005)

¹⁴¹ Kailey, (2005) pg. 106

¹⁴² Green, (2004); Khosla, (2006); Paris, (2006); Rees, (1996); Valerio, (2006)

¹⁴³ Rees, (1996)

¹⁴⁴ Green, (2004)

¹⁴⁵ Paris, (2006) pg. 56

¹⁴⁶ Valerio, (2006) pg. 329

supportive.¹⁴⁷ While some members of his family thought his transition was wrong, his mother and father made an effort to change the names they called him and to accept his transition.¹⁴⁸

While families and friends have emotional relationships as motivators to accept one's transition, employers and co-workers do not. Martino, Johnson and Rees all suffered disrespect and rude comments from non-family members based on their transitions.¹⁴⁹ Martino could not find a job that would accept him with his trans-identity; therefore, his doctor found him a nursing job in a hospital. Even there he received negative comments and snide remarks, but he was able to work at the professional nursing level that he was qualified for.¹⁵⁰ Johnson was up for a promotion until he announced he would be transitioning. When extra money from the promotion would have been helpful, he was passed over, however; he did receive the promotion after his transition was complete, so it does not seem like his boss was prejudice against him, just waiting for him to come back from surgical recovery.¹⁵¹ Rees was unemployed often throughout his autobiography. He was unable to become a clergyman due to his transition and state law prohibiting birth certificate change. He was also excluded from opportunities because he had been in a psychiatric hospital due to stress from his inability to get help for his transsexuality. Perhaps the most difficult aspect was that at jobs he discovered comments were made behind his back and one time even found a drawing of a penis and a vagina on the lunch table with the note, "which is you, Mark [Rees]?" written below them.¹⁵²

On the other hand, in San Francisco, Khosla was able to go to his bosses and explain his transition. They were very supportive; one boss even let him use her private bathroom until he was confident enough to use the men's room in the building. Perhaps due to the area of the country and the intense liberal community residing there, he was more able to be confident at his work place, but he still had fears about his co-workers possibly teasing him and still suffered some female pronouns.¹⁵³ To Khosla, female pronouns were a constant fear and were very scarring when they were directed at him after he had begun his transition. All

¹⁴⁷ Khosla, (2006)

¹⁴⁸ Ibid.

¹⁴⁹ Johnson, et al. (1982); Martino, (1977); Rees, (1996)

¹⁵⁰ Martino, (1977)

¹⁵¹ Johnson, et al. (1982)

¹⁵² Rees, (1996) pg. 153

¹⁵³ Khosla, (2006)

of the men mentioned that they were pleased when they got their first “sir” or “mister” but Khosla went into great detail about how he felt when receiving female pronouns or gendered titles.¹⁵⁴ Cummings, Paris and Beatie are all self-employed: Cummings owns his own gym, Paris works for a trans social network and support group, and Beatie owns his own t-shirt printing business.¹⁵⁵ For this reason their jobs were more secure when they transitioned. However, Beatie mentions that once he went from a notable lesbian in the community to a heterosexual male his lesbian and gay clients left and heterosexual clients came.¹⁵⁶ Green is from the San Francisco area, he does free-lance writing and goes on lecture tours to educate students and employees about transsexuality, therefore his work was also, for the majority, unaffected.¹⁵⁷ Valerio, who lives in the same city, was often unemployed and was most often employed in telemarketing and other part-time jobs.¹⁵⁸ Of the men with consistent full-time jobs (not self-employed), Khosla was the only man who was not subjected to any transition related discrimination or abuse.¹⁵⁹ This could be due to the fact that he worked in California, where many people are liberal minded, during the 1990s when there was information about transsexuality in popular media.

5.2.1. FOCUS 2-THEORY VS. NARRATIVE

Halberstam

As with the first struggle, Halberstam’s theory does not fit what many of these men have recorded. Although some were adults in the lesbian community, which was supportive of them and their masculinity, they still chose to transition. The men from the San Francisco area, as well as Beatie, had strong lesbian support networks; however, this did not change their belief that they were men. Halberstam worries “that as transsexual men become associated with real and desperate desires for reembodiment, so butch women become associated with a playful desire for masculinity and a casual form of gender deviance.”¹⁶⁰ So she recognizes that FTMs are becoming more accepted as men in need of physical change in one way or another, but she worries that this will discredit the masculinity of transgender

¹⁵⁴ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

¹⁵⁵ Cummings (2006); Paris, (2006); Beatie, (2008)

¹⁵⁶ Beatie, (2008)

¹⁵⁷ Green, (2004)

¹⁵⁸ Valerio, (2006)

¹⁵⁹ In June '98 he received a voice mail message saying he was a “fucking queer” but he did not get too upset because he felt it was an insult men would say to other men. Khosla, (2006) pg. 120

¹⁶⁰ Halberstam, (1998) pg. 143

butch women.¹⁶¹ Nevertheless, this does not need to be a conflict or border war, as Halberstam calls it, the more information that is disseminated about similarities and differences between FTMs and transgender butch people, the better chance people will afford them the respect and understanding they deserve. In relation to the older men, it would not have been more socially acceptable for them to change into men, even if it did afford them male privilege. It would have been more socially acceptable for them to feminize themselves instead of embarking on the path of SRS.

It is this basic knowledge that these men have, of a male identity that I wish to continually emphasize in relation to Halberstam's female masculinity.¹⁶² These are not women, although they all followed different roads to reach their male identity, there is at the root of each man's autobiography an identity of man, or transman. Their autobiographies leave no room for one to interpret them as masculine women. Halberstam is confusing, as she says in one place the differences between FTMs and transgender butch people may have harmful consequences, in another section she admits that they are different:

I also recognize that there are huge and important differences between genetic females who specifically identify as transsexual and genetic females who feel comfortable with female masculinity. There are real and physical differences between female-born butches who live some version of gender ambiguity. But there are also many situations in which those differences are less clear than one might expect, and there are many butches who pass as men and many transsexuals who present as gender ambiguous and many bodies that cannot be classified by the options transsexual and butch.¹⁶³

This is a much more appropriate description when considering FTM narratives, but it is hard to know if Halberstam is ambivalent about FTMs or not. This statement though, is all encompassing of the FTM narratives discussed here. The men mentioned in the first two groups (group 1: Martino, Johnson, Rees; group 2: Green, Valerio, Cummings and Khosla), were all specifically identified as transsexual.¹⁶⁴ They underwent hormone injections, surgeries and what legal changes they could, to transform their identities as much as possible to that of man. With Kailey, Paris and Beatie (group 3) these differences were less clear. Both Paris and Beatie were very adamant about their masculinity, but Paris chooses to identify as transman, like Kailey, and Beatie chose to have a baby (arguably one of the most

¹⁶¹ Ibid.

¹⁶² Ibid.

¹⁶³ Halberstam, (1998) pg. 153

¹⁶⁴ Cummings (2006); Green (2004); Johnson (1982); Khosla (2006); Martino (1977); Rees (1996); Valerio (2006)

definitive signifiers of woman) after his transition.¹⁶⁵ None of these men felt it necessary to pursue the extent of surgeries that they could have had and both Kailey and Beatie were satisfied completely, without any form of phallus. This was the case even though Kailey, as a homosexual, was told by his friends that this would inhibit his ability to find a partner.¹⁶⁶ For this third group of men, ambiguity was not always uncomfortable for them. They had established their identities as a kind of man without needing to “go all the way,” so to speak. Therefore, while Halberstam seems ambivalent about how the FTM community affects transgender butch people, she does express the ambiguity that some FTMs embody and acknowledges that they are different from transgender butch individuals.

Prosser

Prosser’s approach is again closer to the experiences of the first two groups of men, but mainly the first. He represents what Khosla and Paris specifically state, the intense aversion to having their female genitals made known to them through sexual contact or gynecological visits.¹⁶⁷ “Parts of the presurgical body remain for transsexuals untouchable; genital eroticism, writes Anzieu, is possible only for those who feel a basic level of security and comfort in their own skins.”¹⁶⁸ However by saying this Prosser, using Anzieu, assumes that genital eroticism is impossible for the presurgical FTM. This is clearly not the case with all of the men, as Valerio not only had sex with his girlfriends but he also describes having enjoyed clitoral autoerotism (masturbation), at the same time he identified as strictly male.¹⁶⁹ Prosser’s descriptions of this second skin are quite appropriate for what some of these men experienced, unfortunately, unlike Halberstam he generalizes these feelings and experiences to all FTMs. The liminal stage when hormones are just taking affect, beards may be short, voices may still be high and mastectomies may be a distant surgery appointment, can be very difficult, which is why some of the men (Khosla and Valerio) felt the need to stay out of public scrutiny until they were more clearly men.¹⁷⁰ Prosser states very effectively:

¹⁶⁵ Beatie, (2008); Kailey, (2005); Paris, (2006)

¹⁶⁶ Kailey, (2005)

¹⁶⁷ Khosla (2006); Paris (2006)

¹⁶⁸ Prosser, (1998) pg. 76

¹⁶⁹ Valerio, (2006); Some would label Valerio’s masturbation as “female” because he is stimulating his clitoris. However, out of respect to his male identity I do not label it as such

¹⁷⁰ Khosla, (2006); Valerio, (2006)

...the daily layerings of binder, several T-shirts, and thick work shirt, the reshaping his body that still has a female chest into male contours form a kind of provisional, transitional male skin or surround, protective (it hides the hated body and prevents his discovery) and at the same time restrictive, stifling (he can't move without it, it's a skin-tight second skin).¹⁷¹

Based on several of the men discussed here, this restrictive second skin is an apt description, but Prosser could delve further. Yes, most of these men from a young age recognized, on some conscious level, that they had a male identity. However, Prosser does not take into account the variation inherent in each man's life story. Some of these men did not feel male until later in life. This could have been because they were not able to identify their feelings, but it could also be that their identity formation was different from the majority of the men. This variation from the transsexual narrative, that Prosser argues against while simultaneously reifying, does not make their transsexuality less legitimate than the others, rather their male identity is still their own and they came to it by a different road.

Discussion

It is important to consider that realizing one is trans and coming out to loved ones and acquaintances is a struggle, even when adversity is not apparent. However, not all of their coming-out stories are negative. For example, Cummings, Paris and Beatie were, at publication able to run their businesses despite the fact that they have all been vocal about their transitions.¹⁷² This is less of a factor for Paris, since he counsils other people like himself, but for Cummings and Beatie to have their businesses survive despite their transition, could be perceived as a positive comment on society.¹⁷³ Johnson was still able to receive a promotion, despite the fact that his employer knew he had just transitioned. The employer simply waited until after Johnson's transition to promote him.¹⁷⁴ Although Beatie lost homosexual business when he transitioned, he gained heterosexual business. Some people then are comfortable buying a product from a transsexual person and in Johnson's case, promoting them. However, while this may indicate a good mark for society, it does not mean that these men did not struggle at all. Their hardship is certainly less than that of someone who's business fails, or who loses his job because he came out as transsexual, but it is important to remember that for all these men, emotionally and personally, realization and subsequent coming out as transsexual was not an easy journey, regardless of how it was

¹⁷¹ Prosser, (1998) pg. 75

¹⁷² Beatie, (2008); Cummings (2006); Paris, (2006)

¹⁷³ Beatie, (2008); Cummings (2006); Paris, (2006)

¹⁷⁴ Johnson, et al. (1982)

received by others. Their transitions were perhaps made slightly easier because they lived in communities that could provide more inclusive societal support and information, but that does not mean that the transition was easier for the man.

One final point is that of both Kailey and Cummings specifically say that they were diagnosed with GID.¹⁷⁵ In order to be allowed to have SRS in the US and UK, transsexuals must be diagnosed with GID by a licensed psychologist and receive letters of recommendation for surgery from them.¹⁷⁶ Despite this diagnosis requirement, none of the other men focus on the fact they were labeled with a disorder, as seen by the medical field. It is interesting to consider why some explain their transsexuality by leaning heavily on medical diagnosis and others do not, rather they see it as a necessary evil in order to get surgery and hormones.

For this second focus area that the autobiographers discuss in their books, that of discovering one is trans and coming out, Prosser is too constricting in his description and Halberstam seems conflicted. Halberstam's description fits some of the men's narratives, those who do not identify as strictly male, while Prosser's fits others, those who have a clear male identity.¹⁷⁷ Working towards a more inclusive theoretical perspective on FTM transsexuality, another mixture of both theories is appropriate. While some of the men need to be understood as clearly male without any concrete female identity, others need to be afforded the recognition of being a kind of man, whether that be one without a penis or one that gives birth. It can be seen that not only is there a variation between transgender people and transsexual people, but also a variation amongst transsexual men, which is unsurprising when considering the amount of variation in any other group (ethnic, sexual orientation, religious groups) of people. This new theoretical perspective has to discuss these differences, either demarcating different subcategories of transsexual, or clearly identifying variation within the single group, but still under the same title.

5.3. FOCUS 3: ACQUIRING HORMONES AND SEXUAL REASSIGNMENT SURGERY

After discovering that they were transsexual and telling some of the close people in their lives, it was then time for these men to find doctors to proscribe testosterone and Sexual Reassignment Surgery (SRS). Again, there was a difference in access to hormones based on

¹⁷⁵ Cummings (2006); Kailey, (2005)

¹⁷⁶ Prosser, (1998); <http://www.aboutequalopportunities.co.uk/what-gender-reassignment-surgery.html>

¹⁷⁷ Halberstam, (1998); Prosser, (1998)

when the men were transitioning. Doctors did not know the proper doses of testosterone to give Martino, Johnson and Rees.¹⁷⁸ They did not have enough experience with transsexual hormone therapy, or what it would do to the transitioning man's body. Johnson's doctor actually stated that "hormone treatment rarely had a dramatic effect and [...Johnson] must on no account expect any great changes in [his] body."¹⁷⁹ These are the experiences of the men after they had finally found doctors that were willing to discuss possible treatment for what was seen as an odd affliction. Martino wrote to Dr. Harry Benjamin (sited as a forerunner in research on transsexuality) to ask for referrals to doctors in his area that could help.¹⁸⁰

Figure 5: Focus 3: Acquiring Hormones and SRS

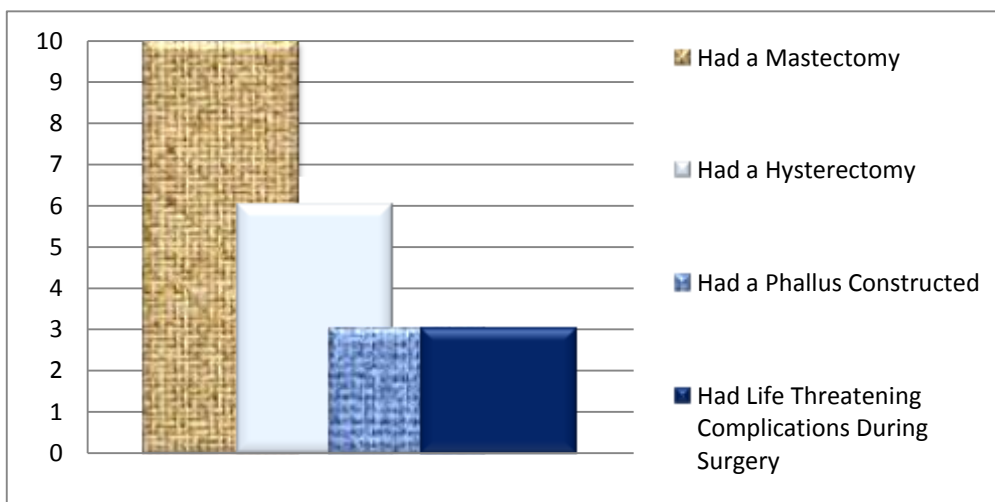


Figure 5 shows an overview of each man's experience with their hormones and SRS. Figure 5 shows that some men even underwent life threatening complications during their surgeries, due to low blood pressure or excessive bleeding during the operation.¹⁸¹ All of the men felt better about their bodies after starting testosterone. Many of them also described it as a second puberty, as their bodies went through the changes brought about by increased levels of testosterone.

Figure 5 also shows which surgeries each man had by publication. All of the men had mastectomies and described it as a positive feeling not to have a visible marker of womanhood. Even when there were complications with the surgery, the man was happy that

¹⁷⁸ Johnson, et al. (1982); Martino, (1977); Rees, (1996)

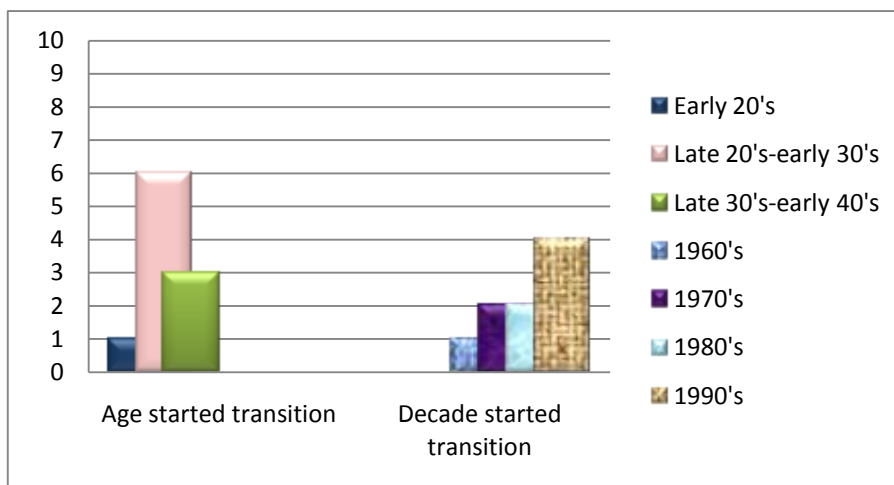
¹⁷⁹ Johnson, et al. (1982) pg. 142

¹⁸⁰ Martino, (1977)

¹⁸¹ Khosla, (2006); Martino, (1977); Rees, (1996)

he no longer had breasts.¹⁸² A little over half of the men had hysterectomies and ovary removal, usually this was because they never wanted to see a gynecologist again and be reminded of their female beginnings.¹⁸³ It was usually a traumatic experience for these men to visit a gynecologist, since it was unavoidable to feel female; also, doctors often told these men that testosterone was unhealthy for female organs, although none of the men were presented with research that proved this.¹⁸⁴ Only three of the men had phalluses constructed. Martino's and Khosla's phalloplasties were highly problematic and they had to have the operation several times before an uninfected phallus could be created for them.¹⁸⁵ Green does not mention complications with his metoidioplasty.¹⁸⁶ It is interesting to note that despite the time difference between Martino and Khosla's phalloplasty surgeries, the 1970s compared to the early 2000s, they had some of the same complications (infection, needed reconstruction, etc). Cummings writes that he is very upset about the lack of advancement in the construction of a phallus for FTM's. He is very angry at what he calls the medical field's inability to create a functioning, aesthetically pleasing penis for FTMs. He believes that if transsexual people had more respect, surgeons would have put more time and research into this procedure.¹⁸⁷ This may or may not be the case; however, it does not seem that great advancements have been made in phallus construction between the 1970s and early 2000s.

Figure 6: Focus 3: Acquiring Hormones and SRS



¹⁸² Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

¹⁸³ Cummings (2006); Green, (2004); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

¹⁸⁴ Johnson, et al. (1982); Khosla, (2006); Paris, (2006); Rees, (1996)

¹⁸⁵ Khosla, (2006); Martino, (1977)

¹⁸⁶ Green, (2004)

¹⁸⁷ Cummings (2006)

Another interesting point to observe is that all of the men transitioned in their late twenties to early forties, with no trend of age decreasing over time (Figure 4). I had predicted prior to my research that the ages of starting transition would decrease over time, as more information became available to people about transsexuality. It would be interesting to see the ages of men starting their transitions over the past ten years, as all of these men started their transitions before the new century. Perhaps a decrease in age of transition would begin to appear, however in the US and the UK there are age restrictions on when one can start hormones (between sixteen and eighteen years) and when one can get SRS and legally change one's gender (eighteen years).¹⁸⁸ Therefore, until age restrictions are removed, there is a limit to how young transsexuals may begin transition; however, some children in the USA, for example, have been allowed to take hormone blockers to delay puberty until they can legally decide on their gender identity.¹⁸⁹

Finally, it must be understood that these men were not only guided by doctors in how and when they chose to transition, but money was also an important factor. In the US, the men could not obtain insurance to cover their cost of surgery.¹⁹⁰ Therefore, they were constrained by finances in deciding when they had their surgeries, with what doctors, and what procedures they underwent. The only person that was expressly not affected by monetary concerns was Khosla, whose job as a lawyer with a recent promotion, allowed him to travel to the best doctors in the field in order to get his surgeries.¹⁹¹ In June of 1999 he went in to complete a previously halted surgery, the rest of his vagina was removed and a phallus was created.¹⁹² His doctor was pleased with the surgery; however, by 2001 at thirty-one years old, he went to Canada for 34,000 USD and stayed at a clinic there after both of his testicular implants had become infected and his urethral extension was blocked. Again, due to his income, Khosla was able to have opportunities that some of the other American men could not, since health insurances will not cover SRS costs.

¹⁸⁸ "The Harry Benjamin International Gender Dysphoria Association's Standards Of Care For Gender Identity Disorders, Sixth Version;" <http://www.publications.parliament.uk/pa/ld200304/ldbills/004/2004004.pdf> The Gender Recognition Bill from the UK parliament

¹⁸⁹ <http://genderfluidkid.blogspot.com/2009/06/dr-metzger-and-blockers.html?spref=fb> a mother's blog about her transsexual child.

¹⁹⁰ One popular insurance company's policy on SRS is listed here: http://www.aetna.com/cpb/medical/data/600_699/0615.html the person must be at least 18 and meet restrictive qualifications, also the policy states out right that most insurance plans exclude such coverage.

¹⁹¹ Khosla, (2006)

¹⁹² His doctor had attempted this surgery before but they had to stop it mid-way through when he lost too much blood. Ibid.

Valerio and Kailey were both very limited by money, due to the lack of insurance coverage for SRS. Valerio bound his breasts for six years before he could afford a mastectomy and Kailey describes overall financial hardship when it came to SRS.¹⁹³ Johnson was hard-pressed to find doctors that even understood what he wanted to do. He was however, able to get hormones and a mastectomy. The mastectomy was done privately; Johnson and his partner saved all their money and went to a small place where they could stay under the radar of the media, as was required by their doctors. Their doctor told them he would not perform the SRS if Johnson told people he was planning on having it.¹⁹⁴ He was satisfied with the results; at publication these were the only SRS's he underwent.¹⁹⁵ Rees was also happy to receive a mastectomy. At the hospital he was finally able to meet another FTM and further establish his confidence in not being alone in his situation. The mastectomy went very well and afterwards he felt wonderful without his breasts, "like they never existed."¹⁹⁶ He was told by his doctor that male hormones were unhealthy for female organs and was advised to get a hysterectomy. During this surgery unfortunately, he had a hematoma which could not be removed and subsequently he needed blood transfusions.¹⁹⁷ In 1978 he went to see a doctor about a phalloplasty, however by publication he was still waiting for chest revision surgery and was unenthusiastic about going through the surgeries for phalloplasty. It is unclear why he was hesitant, but as he states:

I can think of better ways of spending my money especially as I've managed over twenty years without one [a phallus...] I comfort myself with the fact that a penis, whether genuine, constructed or plastic can at times be an encumbrance, and certainly one needs more than that to attract a woman.¹⁹⁸

Therefore, his reasoning for not pursuing phalloplasty or metoidioplasty was most likely grounded by financial constraints.

5.3.1. FOCUS 3-THEORY VS. NARRATIVE

Halberstam

Halberstam's approach to female masculinity is a defense of the psychological evaluation process that FTMs are required to have. Prosser, whom I will later describe, is critical of it. If, as Halberstam claims, many of these men are actually masculine women trying to make

¹⁹³ Valerio, (2006)

¹⁹⁴ Johnson, et al. (1982)

¹⁹⁵ Ibid.

¹⁹⁶ Rees, (1996) pg. 117

¹⁹⁷ Ibid

¹⁹⁸ Ibid. pg. 175

their lives easier by becoming men, then a psychological evaluation is a good way to make sure that these masculine women do not go through with expensive hormones and surgeries before they consider that they may really identify as women. Halberstam's strength in this focus area is that she again, allows for variation more than Prosser does. Halberstam quotes one man's response to her trans theory, Jordy Jones saying:

Jones objected to the very idea that transsexual experience could be represented in any totalizing or universal way: "Not everyone who experiences gender dysphoria experiences it in the same way, and not everyone deals with it in the same way [...] I have a (genetically female) friend who identifies as male and passes perfectly. He's never had a shot. I certainly know dykes who are butcher than I could ever be, but who wouldn't consider identifying as anything other than women."¹⁹⁹

With Jones's examples of his friends and acquaintances we are again faced with the aspect of variation that Prosser does not consider. However, Halberstam's underlying theme throughout her book, that less distinction between FTMs and transgender butch women is necessary, is not the appropriate approach to understanding the FTM narratives discussed here. While recognizing variation, Halberstam forgets about those men who are presenting a consistently male identity, one that they feel confident about, one that is not necessarily just a recreation of the "wrong-body formula" that Prosser speaks of.

Prosser

Prosser answers aptly, the question of why transsexuals desire what can be life threatening surgeries: "For transsexuals, surgery is a fantasy of restoring the body to the self enacted on the surface of the body [...] what makes the transsexual able and willing to submit to the knife—[...] is the drive to get the body back to what should have been."²⁰⁰ For many of the men this is an accurate description. All of the men underwent the knife to receive mastectomies, Martino, Rees and Khosla suffered complicated procedures in order to have their bodies reflect "what should have been."²⁰¹ This is a crucial aspect to understand when educating one's self on trans theory because it is at the core of whether or not transsexuals can receive payment assistance for these surgeries from insurance companies. Many believe, as Prosser points out:

¹⁹⁹ Halberstam, (1998) pg. 148-149

²⁰⁰ Prosser, (1998) pgs. 82-83

²⁰¹ Ibid. pg 84

...that transsexuality consists in the brutal mutilation of healthy bodies, that sex reassignment surgery does not so much effect sex change as it transmogrifies 'normal' men and women into unsexed or hermaphroditic monstrous others [...] this association of sex reassignment surgery with the cosmetic enables many health insurance companies to classify it as such in an attempt to evade funding responsibilities for transsexual clients—and this in spite of the fact that transsexuality continues to be classified according to a disease model by the American Psychiatric Association: an illness requiring a medical remedy.²⁰²

Prosser, in this case, is very useful in understanding this focus area of the FTM autobiography. By explaining so succinctly why it is that some transsexuals desire surgery to change their already healthy bodies, Prosser helps others understand the driving force that motivates these men.

An aspect of transitioning that Prosser critically focuses on in his book is that of how FTMs must first convince a psychologist of their transsexuality before they may qualify for SRS.²⁰³ However, I did not find a large amount of mistrust of the psychological professionals in these autobiographies. Although this could have been a purposeful omission on the part of the autobiographers, their consistent reference to other difficulties they faced indicates that had they found the diagnosis process difficult they would have mentioned it. All of the men had to go through a physiological evaluation in order to get access to hormones and surgery.²⁰⁴ Instead of resenting the requirement to get a psychological evaluation to be cleared for hormones and surgery according to US law, Khosla enjoyed the experience in the beginning, feeling that it is a big relief. However, one therapist he saw was not overly sensitive, and withheld some of the referral letters for his SRS because of negative comments about his mental health from a massage therapist that he had in the past. He had to fight to finally receive his hormone referral, and subsequently realized how much at the mercy of others he and his dreams to be a man were.²⁰⁵ However, that was the only negative instance that I found against the requirement for psychological evaluation. Kailey and Cummings seemed fine with their diagnosis of GID and did not resent having to see a therapist; instead

²⁰² Ibid. pg. 81

²⁰³ Ibid.

²⁰⁴ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

²⁰⁵ Khosla, (2006)

both of them seemed relieved by this diagnosis. That they could blame their transsexuality on a medical reason seemed to have given them comfort.²⁰⁶

Prosser blames the psychological evaluation requirement for the creation of the generic transsexual narrative.²⁰⁷ The FTM must recite this narrative in the correct way in order to get their referral letters for SRS, Prosser says. However, Prosser's own generalization of transsexuality, focusing mostly on one man's transitional story (Raymond Thompson), does as much reifying of the transsexual narrative as he accuses the psychological field of doing. Prosser gives a long description of Thompson's wait for surgery saying, "a penis is essential to his body image (from late childhood, he packs the front of his trousers, filling in for what he feels should be already there), more than half of the autobiography concerns itself with this long distressing wait for this surgery."²⁰⁸ By continually relying on Thompson for most of his examples, Prosser implies that Thompson's is the archetypal transition story. However, while Khosla and Martino discuss at length the distress at waiting for surgery and the intense desire for a penis of their own, they are only two out men out of several others who did not describe the need to trouble with metoidio- or phalloplasty.²⁰⁹

Discussion

All of these men had different lives leading up to their SRS and subsequent transitions. The men were all able to get mastectomies despite the differences in their lives. It is true they all held the similar experiences of feeling male with female anatomy, even if the age of realization of these feelings varied for all of these men.²¹⁰ Halberstam allows for variation among trans experiences, but to the point of excluding the more normative transitions of those who feel greater confidence with their masculinity over the course of their lives. Some of the men differ from the narrative that Prosser generalizes, and most of them do not focus greatly on the psychological evaluation aspect of their transition, indicating that it might not be as negative as Prosser implies.²¹¹ Only Kailey and Khosla expressed frustration with this

²⁰⁶ Cummings (2006); Kailey, (2005)

²⁰⁷ Prosser, (1998)

²⁰⁸ Ibid. pg. 75

²⁰⁹ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

²¹⁰ Ibid.

²¹¹ Ibid.

component of their transition.²¹² Kailey problematizes the fact that treatment for transsexuality is solely based on a diagnosis, and therefore, transsexuals' SRS is at the whim of a medical professional.²¹³ However, this does seem at odds with his proclamation that he has GID. Instead of ignoring the diagnosis like some of the other authors did, Khosla did experience problems with getting his referral letters, which caused him stress because he was very keen to get the hormones and surgeries started immediately; however, in the end he did receive the letters.²¹⁴

A new approach to trans theory must encompass both the transsexual man and the transman, again a joining together of Prosser and Halberstam. Overall, the focal point of these men's narratives when discussing hormones and SRS is the amount of money that goes into getting them and the lack of knowledge from doctors on the subject of transsexuality. A strong reason that an updated and all-encompassing trans theory is needed is to help the wider public understand the needs and identities of these men. Requiring insurance companies in America to include testosterone and SRS as covered medical costs would be more of a help to FTMs than doing away with the psychological evaluation. It would also be helpful to require all doctors who perform mastectomies and hysterectomies to be well informed about the needs of FTMs, which would make these men's transitions easier, as many of them discuss having to explain their hormonal and surgical requests to their doctors.

5.4. FOCUS 4: TRYING TO ESTABLISH/RE-ESTABLISH A CONFIDENT IDENTITY

With the help of testosterone and SRS, these men were finally able to have the world see and interact with them as men. However, their hardships did not end there. After being socialized as girls and women it was not an easy task to learn the nuances of being a man. Additionally, they had to battle legal regulations that restricted their state recognized gender identity, and to decide what types of men they wanted to be, activists for the transsexual cause or men-about-house who stayed out of the media. Some of these men felt themselves to have been little boys before parents and society directed them towards girlhood, therefore, any male identity they had was underdeveloped and any female identity they developed was constrained by their latent male identity. Some of the men had to re-learn to embrace the instincts they had as children that they had been told were inappropriate. Overall, the men had to learn to negotiate the world as a man. This is something that socialization does for

²¹² Kailey, (2005); Khosla, (2006)

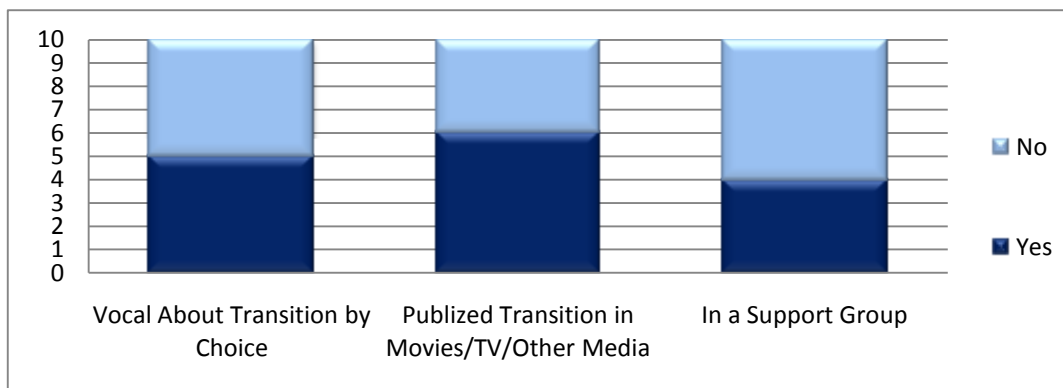
²¹³ Kailey, (2005)

²¹⁴ Khosla, (2006)

every boy and girl according to their society's mores, yet these men had to become men without the help of years of training.

Figure 7 shows how each man dealt with his transition. Over half of the men came out as transsexual in very overt ways. They not only wrote books about their transitions, they came out in movies, on talk shows and in newspapers.²¹⁵ These men were usually motivated by the desire to help other men like themselves have an easier time than they did with their transitions. The autobiographers also used support groups to help themselves feel better about their new visible manhood. Martino and his wife formed their own FTM support group in their mid-western town to be a source of knowledge for other men and their partners.²¹⁶

Figure 7: Focus 4: Trying to establish/re-establish a confident identity



So while keeping a low profile to some degree, Martino was able to help others with his support group and his autobiography.²¹⁷ However, over half the men found that they either could not find a support network, or they did not want to be part of one.²¹⁸

Some of the men had a hard time feeling comfortable with their male identity (Figure 8).²¹⁹ It had been hidden for so long that they did not know how to express themselves as males confidently. Johnson had a hard time coming to terms with his male identity. He blamed God for a long time and had no emotional support besides his partner Cathy, with whom he was often at odds. When he began a testosterone regime he did feel calmer and less bitter about his situation, but at publication he was a troubled man.²²⁰ He worried about his and Cathy's child growing up with parents who attracted the media and whom could not

²¹⁵ Beatie, (2008); Cummings (2006); Green, (2004); Khosla, (2006); Martino, (1977); Rees, (1996); Valerio, (2006)

²¹⁶ Martino, (1977)

²¹⁷ Ibid.

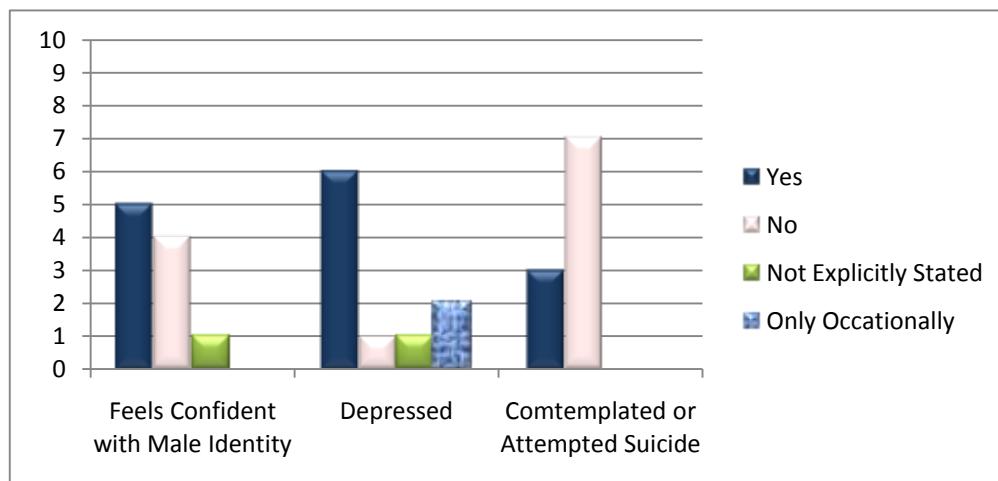
²¹⁸ Beatie, (2008); Cummings (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

²¹⁹ Johnson, et al. (1982); Kailey, (2005); Paris, (2006); Rees, (1996)

²²⁰ Johnson, et al. (1982)

legally marry.²²¹ Rees also felt uncomfortable with his manhood. He knew he was a man, but he felt persecuted by his country and those who did not support him. His failed petition to the Strasbourg court of human rights against the British government left him still without a fully changed legal gender.²²²

Figure 8: Focus 4: Trying to establish/re-establish a confident identity



Interestingly, eight out of the ten men either had negative relationships with their fathers or their fathers had died prior to their transitions.²²³ These men did not describe having any substitute father figures. Therefore, only Valerio and Khosla could turn to their fathers in order to get any guidance about their new experiences with manhood. Throughout this thesis I want to clearly convey these men identify as men or transmen, and that they did not suddenly become men overnight, nothing turned them into transsexuals. However, since most of the men here did not have relationships with their fathers when they transitioned, it would be interesting to find out how many other FTMs experience the same (lack of a father figure). Martino, Paris and Beatie all reported mild to severe physical abuse at the hands of their fathers as well.²²⁴

Most of the men suffered from depression at different points in their lives. In fact, by the end of their autobiographies, most of the men could not be described as happy. It is not clear how severe each man's depression or unhappiness was however, there was a wide

²²¹ Johnson, et al. (1982)

²²² Rees, (1996)

²²³ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Martino, (1977); Paris, (2006); Rees, (1996)

²²⁴ Beatie, (2008); Martino, (1977); Paris, (2006)

range. None of them disclosed whether or not they were taking antidepressant medication. They do not describe regretting their transitions in any way, but they have struggled throughout their lives, and low self-esteem and social discomforts did not disappear as soon as they had hormones and surgeries.²²⁵ Some even contemplated suicide, though fortunately, those that attempted did not succeed. Cummings, emotionally and psychologically came across as very unhealthy. He attempted suicide, and was addicted to drugs. He states in his book that, “suicide becomes [the transsexual’s] only outlet.”²²⁶ At one point in his book he says that living “as both” genders was a, “blessing,” earlier he also says that it was a “hell.”²²⁷ He goes on to say that he has in fact buried Maritza (his previous name), and therefore his past self is dead to him. He also tends to talk about “us” as Mark and Maritza, himself as two people.²²⁸ Valerio also tends to use the third person when talking about his past, but he does not talk about himself as two people at the same time, that the use of “us” connotes.²²⁹

Not all hardships and depressed feelings came from their transsexuality. Beatie’s mother for example, committed suicide and his father was physically abusive.²³⁰ These factors, added with his transsexuality made him depressed at times in his life, however at publication he is one of the few that seems happy. In the case of Rees, despite being pleased with sharing his story through a newspaper article, a TV show, a radio program and his autobiography, he describes himself as lonely person and says he had contemplated suicide at times. He was anorexic as well, wanting to decrease what he felt were his too feminine thighs.²³¹ He fought to make ends meet financially, but he was honored by being elected as an official of his town. Unfortunately, this did not stop children from yelling gender related abuse at him on the street.²³² Green still has times of depression, for example he writes, “why did people think I was wrong for being me, even now [after surgery] when I felt I had done everything I could to realize my authentic self?”²³³ Throughout his autobiography, Green conveys his hope that by educating others he can prevent people from thinking that he and others like him are wrong to be themselves.

²²⁵ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

²²⁶ Cummings (2006) pg. 40

²²⁷ Ibid. pg. 44

²²⁸ Ibid. pg. 47

²²⁹ Valerio, (2006)

²³⁰ Beatie, (2008)

²³¹ Rees, (1996)

²³² Ibid.

²³³ Green, (2004) pg. 31

Some men dealt with their difficult transitions by not striving for manhood, but instead transgenderism. Kailey and Paris do not see themselves as men, but instead as transmen.²³⁴ In this way they have accepted that they do not have to be any particular type of man, and they feel less pressured than they previously had (prior to calling themselves “transman”) to copy male stereotypes. Kailey resents having to go through the processes of legally changing his gender and in Colorado there were no legal channels through which he could change his birth certificate, so he may never be fully of one gender. However, he did not want to change his birth certificate because he felt like he has lived as two genders and did not want to erase his past.²³⁵

As seen in Figure 7 (above), some of the men found support groups to be part of, however Beatie and Kailey found that the lesbian, gay, bisexual (LGB) community discriminated against transsexuals, that there was homophobia in the trans-community.²³⁶ The tone to Kailey’s writing is bitter and angry at society’s gender norms. He felt that society was labeling him as faulty because he has GID.²³⁷ Kailey, Valerio and Khosla all describe a need, not for support groups, but for hibernation during their early transition time, until their masculinity was more apparent.²³⁸ Khosla and Valerio tended to stay at home as much as they could during their transition.²³⁹ Khosla even went so far as to organize his work from home during this entire ambiguous stage.²⁴⁰ During the first few months on testosterone Kailey was uncomfortable, the transformation of his face in the mirror seemed unrecognizable and he dreaded leaving the house because he felt that the in-between stage was troublesome for him and others.²⁴¹ Kailey had a hard time with the fact that he was not socialized as a man, he was unsure of what kind of man he wanted to be and he worried that he had become a vulgar, insensitive man.²⁴² Unfortunately, he felt that everything he had learned for forty-two years as a woman was worthless, that there was no longer any use for it in his now-masculine body.²⁴³ He was a depressed man at publication, and felt that his body was not totally his, since he had to discuss it so much with other people. He also had a hard

²³⁴ Kailey, (2005); Paris, (2006)

²³⁵ Kailey, (2005)

²³⁶ Beatie, (2008); Kailey, (2005)

²³⁷ Kailey, (2005)

²³⁸ Khosla, (2006); Valerio, (2006)

²³⁹ Khosla, (2006); Valerio, (2006)

²⁴⁰ Khosla, (2006)

²⁴¹ Kailey, (2005)

²⁴² Ibid.

²⁴³ Ibid. Pg. 40

time adjusting to being labeled gay after his transition, since he had been perceived as a heterosexual his whole life.²⁴⁴

An interesting point to focus on is that these three men (Kailey, Khosla and Valerio) felt it was difficult to leave their homes during their early transition, because they were so easily confused for either gender. Each time they were addressed with a male pronoun it was a triumph but each time they were addressed with a female pronoun they wondered what they had done wrong that day to seem more feminine.²⁴⁵ The stress of not knowing how they would be perceived by others was sometimes too much for them, and they chose to avoid confrontation. Kailey is an interesting case because until he transitioned he was part of the mainstream, heteronormative society. Unlike the other men, he did not have an identification of lesbian and therefore, a minority. When he realized his transsexuality, he became a double minority, both transsexual and shunned by many in the homosexual community, as well as a homosexual therefore, a target of discrimination from heteronormative society in both cases.

I have previously mentioned that Valerio had a difficult time accepting the fact that he was leaving the exclusive lesbian feminist community to become the object of his past derision, a man.²⁴⁶ Following that, it took him a while to learn that things he could do as a woman were no longer possible. His friend, Bob, warned him about the connotations of a man wearing Valerio's style of dress:

'When you wear a black leather motorcycle jacket like that, man, you gotta be careful. If you do that, it looks tough, like you're ready for something [...] and those shades. Max, if you wear dark shades that hide your eyes, that's it, man, they're [other men] gonna go after you! [...]' [...] What is intriguing about Bob's observations is that these are the same accessories and styles that had actually warded off trouble in the past. When I was a woman, I'd found that wearing a black leather jacket, spiked black hair, dark reflector shades, army boots, chains, and lots of metal seemed to keep away men on the streets.²⁴⁷

His leather, punk, butch style of dress that had once warded off violence from men became an invitation for violence from men after he transitioned. Suddenly, he no longer looked like a woman that should not be disturbed, but like a man who was looking for trouble. Then, he echoes a sentiment from Martino, the loss of close, married female friends. Both men

²⁴⁴ Ibid. Pg. 88

²⁴⁵ Kailey, (2005); Khosla, (2006); Valerio, (2006)

²⁴⁶ Valerio, (2006)

²⁴⁷ Ibid. pg. 299

realized that they had gone from innocent women to possible competitions for the husbands and boyfriends of their female friends.²⁴⁸ Valerio also shares a surprise with Khosla at noticing women's changed behavior towards him. Not just in the flirtatious world, but in the world of a dark street, late at night.²⁴⁹ They realized they were now inciting fear in women who were walking alone, as Valerio describes, "I'm perceived as male now, and therefore, possibly a predator—a rapist, serial killer, or strong-armed thief."²⁵⁰ They are both deeply upset by the fact that by becoming men they have become perceived threats by women.²⁵¹

5.4.1. FOCUS 4-THEORY VS. NARRATIVE

Halberstam

Halberstam gives more discussion on this post-op time than Prosser does, but still not the amount that it deserves. She engages the problem of transphobia in the homosexual community, saying, "gays and lesbians fear that some forms of transsexualism represent a homophobic restoration of gender normativity."²⁵² In other words, they worry that transsexuals change sex because they do not want to be seen as homosexuals. While this fear exists, it is unfounded, especially currently when homosexuality is not as stigmatized as it was. Arguably it is easier, safer and cheaper to be a homosexual than a transsexual today in the US and UK. There are also those, like Kailey, who transition despite becoming labeled as homosexual.

Halberstam also engages this post-op time by discussing the difference between those transsexuals who do "leave geographies of ambiguity behind," and become completely perceived as men, physically and legally, and those who "have bodies that are totally ambiguous," who "do not define their transsexuality in relation to a strong desire for penises [...] and they may experience the desire to be trans or queer more strongly than the desire to be male."²⁵³ Again, Halberstam speaks for those like Kailey and Beatie especially, who decide that man does not need to be the end goal, they can be confident in their identities as transman or man who gives birth.

²⁴⁸ Martino, (1977); Valerio, (2006)

²⁴⁹ Khosla, (2006); Valerio, (2006)

²⁵⁰ Khosla, (2006); Valerio, (2006) pg. 259

²⁵¹ Valerio, (2006); Khosla, (2006)

²⁵² Halberstam, (1998) pg. 144

²⁵³ Prosser, (1998) pg. 164

Prosser

Prosser does not give enough thought to the time after SRS. He describes how “if psychic damage can inscribe itself on the skin, conversely and unsurprisingly, damage to the material skin [...] is likely to damage the subject’s body image, to alter his or her bodily sense and presentation,” meaning that one’s body, exhibiting characteristics contrary to our sex, will harm the person’s body image.²⁵⁴ He points out struggles with identity and society for the FTM before the transition, but does not focus enough on the struggles after transition. The hardships of life in general can cause non-transsexuals depression; those common problems, coupled with the fundamental difficulty of not having one’s body in line with one’s gender, can damage a person’s self confidence.

The growth of one’s identity, which progresses throughout childhood and into adulthood, is not as easy for these men. It is not hard to understand why most have suffered from severe depression and some even considered suicide during their lives. Although most of the men expressed relief after their mastectomies or tears of joy after phalloplasties, their problems have not been all solved with hormones and surgeries.²⁵⁵ These are still men who have suffered identity crises. They may have been sure from birth that they were male, but that does not mean having the rest of the world see their masculinity, even if they always knew it to be there, will be an easy transition. I would be interested to find out what Prosser’s thoughts are about this after period. Would he speak more positively of mental health professionals and encourage FTMs to make use of their resources? While some men have fantastic support networks with their partners and/or families, there are many others who may benefit from the help of a psychologist. For this reason, mental health providers should be required to learn about transsexuality and have resources available if they have a transsexual patient, not just for how and where to get hormones and SRS, but how to feel confident with their new outward masculinity, how to come out at work, and how to feel a strength in their identity that they may not have felt before.

Discussion

Therefore, since Halberstam and Prosser are lacking in discussion of this forth focus area, in the progression towards a new theoretical viewpoint this post-op time needs to be extensively

²⁵⁴ Prosser, (1998) pg. 72

²⁵⁵ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

engaged.²⁵⁶ New trans theory should not only help post-op transsexuals understand the varying complications of enacting a male identity in a perceived male body, but it needs to educate everyone on the variation of what it is to be man, woman, or other. Mental health professionals need to know the concepts of transsexual identity to help guide their patients towards a confident self-concept of a post-transition man or transman. More discussion needs to occur on how socialization as a girl and woman does not have to be a waste (as Kailey believes), but can still be applicable. A new trans theory needs to clearly dispel the myth that transsexuals are escaping homosexuality by transitioning. This time after starting hormones and recovering from SRS is a crucial and interesting continuation of a person's life and should be engaged with more in the future.

5.5. FOCUS 5: ROMANTIC/SEXUAL RELATIONSHIPS

Of the struggles I have identified, one of the greatest problems for these men has been finding a loving, romantic and sexual partner. Of the nine heterosexual men, finding a woman that would accept them as men first and transsexuals second was a constant theme throughout their books.²⁵⁷ Kailey also expressed the wish to find a long-term, male partner but was not hopeful.²⁵⁸ Figure 9 shows the romantic relationships that these men had prior to and after their transitions, as well as if they have children or not.

Children they had themselves through pregnancy and delivery are listed as biological; children that were had with female partners are listed as non-biological. Johnson and Paris are listed as not married, but they wanted to be. At the time of publication it was not yet possible for them to marry their partners, because their genders were not completely changed and same sex marriage was not legal in the UK.²⁵⁹

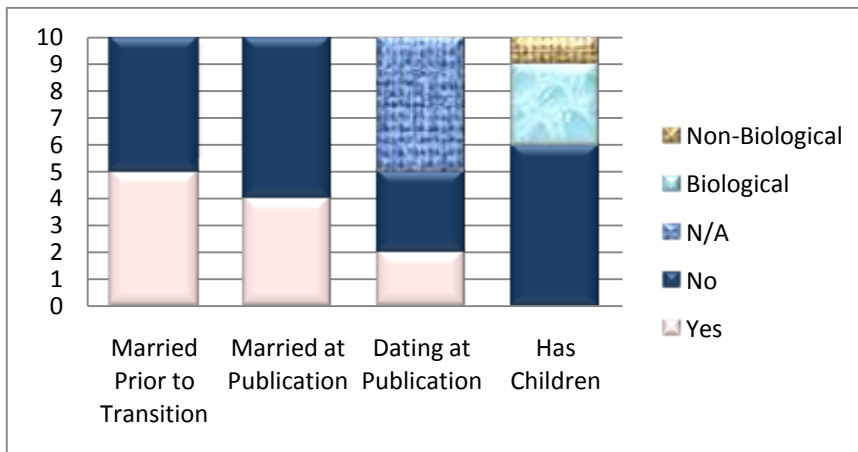
²⁵⁶ Prosser is so thorough with describing the rest of the general transsexual narrative, this omission implies that he does not think this forth focus area is important. Halberstam is not as thorough as Prosser, so excluding descriptions from this focus area may not mean she sees it as unimportant.

²⁵⁷ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

²⁵⁸ Kailey, (2005)

²⁵⁹ Johnson, et al. (1982); Paris, (2006)

Figure 9: Focus 5: Romantic/sexual relationships



Of the ten men, six were married or in committed relationships at publication and the remaining four wanted to find a wife or long term partner.²⁶⁰ Martino was lucky to find a woman he describes as the love of his life, in Rebecca, who was strong enough to stand by him throughout his transition and her family’s discomfort.²⁶¹ Early in their relationship, he told her that she was not a lesbian for loving him, but that he was a man and would someday get SRS. Rebecca responded hesitantly but positively to this, as she identified as heterosexual and did not want to be considered a lesbian, since at the time it was highly stigmatized to be one in their area of the US. She needed some time for consideration, but her love for Martino helped ease the acceptance of his still-female anatomy. After his legal gender change they were able to get married. Not in the church of their choice which rejected them when they learned of Martino’s past, but in another church surrounded by their friends and what family supported them.²⁶² Johnson was happy to find Cathy, who despite being named Eugene at the time (a pre-op MTF), was an immediate attraction to him. He had just started realizing his attraction to women and was considering having a lesbian affair when he and Cathy discovered they were both transsexual. He initiated an affair with Cathy (Johnson was married to a man at the time); however, due to the intense fear they felt about people finding out their identities, they were described as highly insecure in their relationship. They had not been able to marry at publication (because people knew from media attention that

²⁶⁰ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

²⁶¹ Martino, (1977)

²⁶² Ibid.

they were transsexual) and Johnson had had an affair with a female co-worker for quite a while.²⁶³

Like Martino, Cummings met and fell in love with a woman when he considered himself a lesbian, or something like a lesbian. He did not say much about his wife except that she is perfect for him and that due to his past, he feels that he is an expert lover and pleases her sexually very skillfully.²⁶⁴ Paris is in a long term relationship, and his partner writes a chapter of his book to explain her point of view. He did not go into detail about meeting her, but they were unable to be legally married at publication. They were waiting for his legal gender change to go through after the Gender Recognition Act passed in the British parliament in 2006, then they would be able to get married.²⁶⁵

Rees had many crushes on different women throughout his life. One object of his affection seemed interested at first but then shut him off all of a sudden. Another woman who was mentally unstable, had a relationship with him for a while, but it also ended badly when he realized how unwell she was. At publication, he was in his fifties and was not optimistic that he would meet a woman who would want to have a long, lasting relationship with him. Due to British law at the time, he was also unable to legally marry if he did meet someone.²⁶⁶ He was very depressed about not having someone to share his life with, and was convinced that most FTMs were able to find partners, which made him feel doubly lonely.²⁶⁷

Kailey, like Rees, had accepted the fact that due to his transsexuality he would most likely be single for the rest of his life. He used to be married to a man prior to his transition. Since his transition his marriage has broken up. He says that his friends worry about him because they do not see how a gay man could ever be attracted to a man without a penis. Since Kailey does not want “bottom surgery,” this will perhaps be a hindrance in finding love. In fact, Kailey himself said that he would not want to date a transman, “I refused to even entertain the idea. I wanted a man with a penis—not just any old penis, but a fully functioning, natural one.”²⁶⁸ This was before he met a lot of transmen; he thought they could not be really masculine. After his first FTM conference he realized he was wrong; “I will

²⁶³ Johnson, et al. (1982)

²⁶⁴ Cummings (2006)

²⁶⁵ Paris, (2006)

²⁶⁶ Rees, (1996)

²⁶⁷ Ibid.

²⁶⁸ Kailey, (2005) pg. 99

always be attracted to maleness. However, my definition of maleness and what I find attractive were forever altered by this experience.”²⁶⁹ He would now consider a relationship with a transman but by publication had not had one. He also was not sure when he should mention his trans identity to his dates. He told a couple of men after the first meeting and they were displeased; in another instance, he told a man before they had met in person and the date was cancelled.²⁷⁰

Green was stable enough in his lesbian commitment to have two children. Once he decided to transition that relationship did not last. He is still close with his children, but is now legally married to another woman, Heidi. He does not describe much of a transition to perceived heterosexuality but perhaps it was not difficult for him, since he felt the women he had dated were mostly heterosexually identified.²⁷¹ Valerio had many relationships as a lesbian but does not describe many of his relationships after transition. He had a hard time transitioning from his lesbian feminist past to his heterosexual future. When he came out to his lesbian feminist friends they thought he was a traitor to the cause and he very quickly realized that he could no longer be part of the same circles that he used to be.²⁷² Some of his friends just plain disapproved of him being a heterosexual man. At publication he had no stable romantic relationship.²⁷³

Khosla did not have a significant other at publication. He had a deep love for one of his female friends, but she was a lesbian and in a relationship. He hopes that now his surgeries are complete, he can meet a woman that will marry him.²⁷⁴ Beatie is married to a woman, Nancy, and they love each other very much. He met her when they both were looking for lesbian relationships. She had been married to an abusive man in her past and had two daughters. Nancy is some years older than he is, but they make a loving partnership. She helped him to be confident enough to change his gender, and then to have a child himself.²⁷⁵

Beatie, like Martino, Green and Cummings, was able to live out his dream of getting married to a woman he loved.²⁷⁶ Johnson, Rees, Kailey, Khosla and Paris (who expressed the

²⁶⁹ Ibid. pg. 102

²⁷⁰ Kailey, (2005)

²⁷¹ Green, (2004)

²⁷² Valerio, (2006)

²⁷³ Ibid.

²⁷⁴ Khosla, (2006)

²⁷⁵ Beatie, (2008)

²⁷⁶ Cummings (2006); Green, (2004) ; Martino, (1977)

desire to marry or have a same-sex committed relationship) were, at publication, unable to reach their goals due to inability to find the right partner who could accept them, or for legal reasons.²⁷⁷ Valerio seemed to also want to find a long term relationship but it was unclear whether marriage or long term commitment was his desire.²⁷⁸

5.5.1. FOCUS 5-THEORY VS. NARRATIVE

Halberstam

Halberstam discusses this focus area of FTM transsexual lived experience only by criticizing Martino and Rees's tendency "to overemphasize the differences between butch womanhood and transsexual manhood."²⁷⁹ However, as previously mentioned, these men did not identify as lesbians, and at a time when homosexuality was stigmatized, they wanted to distance themselves from it, since they did not feel that it described them. From their descriptions of lesbians, as Halberstam points out, they did not have a good understanding of women who love women or the way they express femininity or masculinity; this is understandable though, since neither men engaged in communities where they could learn such information. Halberstam cites this as the reason transsexuals are criticized for being homophobic.²⁸⁰ However, Martino, Johnson and Rees did not shy away from a lesbian identity because they were homophobic, they did so because they did not identify as a woman who loves other women.²⁸¹ If they had, then the process of beginning their transformations would not necessarily have felt so appropriate for them, their mastectomies would not have felt like such a relief.²⁸²

Halberstam also criticizes websites where transsexual men "send each other tips on how to pass as a man," because "many of these tips focus almost obsessively on the care that must be taken by the transsexual man not to look like a butch lesbian."²⁸³ However, Halberstam misinterprets these men's desire. They are not anti-butch lesbian (or at least the men in these autobiographies were not), they just want to look clearly male, especially when trying to find a romantic partner.²⁸⁴ When the men from these narratives were attracted to

²⁷⁷ Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Paris, (2006); Rees, (1996)

²⁷⁸ Valerio, (2006)

²⁷⁹ Halberstam, (1998) pg. 155

²⁸⁰ Halberstam, (1998) pg. 144

²⁸¹ Johnson, et al. (1982); Martino, (1977); Rees, (1996)

²⁸² Johnson, et al. (1982); Martino, (1977); Rees, (1996)

²⁸³ Halberstam, (1998) pg. 156

²⁸⁴ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

potential partners they wanted to be clearly identifiable to these women or men as men themselves. Especially for the men who felt that their partners pre-transition were heterosexual. The concern is not that one might be confused as a butch lesbian, because it is an identity that would be completely undesirable for these men (after all some of them did have a similar identity prior to transition). The concern is that the man might be confused for a butch lesbian and either attract lesbians, who will be disinterested when they find out that he is a transitioning FTM, or that he will not attract heterosexual women, who might think he is only attracted to lesbian women. Just like anyone who goes into a social meeting place to look for possible significant others, these men have to dress in a way that will attract the kind of potential partner they are looking for.

Prosser

There is a noticeable hole in Prosser's work on FTM relationships. He is very descriptive of the transsexual narrative, going into great detail about how transsexuality is represented in these autobiographies, until he reaches this post-SRS time period. Despite the fact that both Martino and Rees's narratives (which Prosser uses) describe post transitional experiences, he does not delve into analyzing romantic relationships, as he does with the other occurrences. Again, because he omits romantic and sexual relationships, Prosser implies that this is not an important part of a transsexual narrative.

Discussion

As these men's narratives show, finding a partner is an important event for them. For some of the men they were lucky enough to get what they desired, a companion to share their lives with. These women, whom they (the FTM autobiographers) often describe as heterosexual before their transitions, should be discussed in more detail. Who are these women who overcome anatomy to understand the man inside? Who are the lesbian women that find it difficult to continue loving their partners after they have become visible men? While that could be a whole other study on its own, some discussion of these partners should be included in a new trans theory. In concert with that discussion should be one on homosexual relationships. Are the only male partners who fall in love with FTM men FTMs themselves, or do biological men also find transsexual men to be wonderful and loving partners? This is yet again a research paper of its own. What is important to take away from this focus area of FTM narratives is that theory needs to be further developed to help people understand post hormones or post-op transsexuals and the people they love.

6. EVALUATION OF THEORISTS AND THEORY CREATION

6.1. ARE PROSSER AND HALBERSTAM APPLICABLE TO UNDERSTANDING TRANSSEXUAL NARRATIVES?

Using the five focal points from my empirical material, the ten FTM transsexual narratives, I have shown that the two leading theorists on male transsexuality, J. Halberstam and Jay Prosser, are lacking in some areas. Halberstam makes judgments and contradictions about FTMs that are problematic. In one instance, Halberstam says that distinctions between masculine women and FTMs need to be diminished, in the next that they are very real and concrete. Halberstam does help one understand those FTMs who fall outside of Prosser's narrow description. By pointing out that some men come to transsexuality by different paths and that some feel the need for little to no SRS in order to feel comfortable with their masculinity, Halberstam gives a voice in her theory to those who have a less exclusive understanding of sex and gender.

Halberstam focuses her theory on achieving a more fluid form of gender classification, which while honorable (in its attempt not to exclude, but include the large variety of gender and sex expression), is not necessarily how these men feel about themselves. Instead of finding that the men who published earlier portrayed stricter masculine roles and those who published more recently exhibited a more fluid idea of gender and sex identification, these narratives show a continuing need to classify self-as-man. Instead of blaming society for a strict gender binary as Halberstam does, I understand from these men that they are men. Even though they have queer options of identity now available in some subcultures, or because they live in areas where gender and sexuality are less strictly regulated, these men are identifying in many instances as average men. Whether this will change in the coming years, I do not know. However, after reading these men's autobiographies I do not believe the abolishing of gender categories is necessarily the way to proceed. Broadening categories and accepting variation is important but many still feel comfortable with the modern conceptualizations of man and woman.

Prosser discusses FTM transsexual experience in great detail, explicitly showing the difficulties that FTMs have to overcome in order to feel happy, comfortable and strong in their skins. However, he focuses greatly on only one transsexual narrative and describes transsexuality as if it manifests itself in only certain ways. He implies that the FTM

experience is feeling deeply uncomfortable in one's skin, that one is alienated from his body, that he sees gender as a black and white distinction between man and woman. Prosser says that this "wrong-body formula" is accurate, while simultaneously criticizing the psychological and medical fields for forcing FTMs to create this single acceptable narrative of FTM experience. In the end, Prosser recreates another generalized transsexual narrative instead of showing the variation inherent in these men's experiences.

Prosser describes accurately and with great respect the patterns that exist in FTM's narratives, feeling male in a female body, struggling with stereotypes of gender and fighting for a transition to visible manhood. Using Anzieu's concept of "skin ego," Prosser eloquently describes the importance for one's skin to match one's subjective experience and the extent to which one's skin (the exterior that is seen) shapes one's self-concept. However, he leaves his readers wanting more, wanting discussions of life after transition, for the narratives do not end necessarily, when the man leaves the hospital. He does not engage the men who come to their transsexual realizations later in life, those who did not feel alienated from their female bodies, who are content and happy in their skins (as much as anyone can in our image-critical society), even when lacking a penis. Prosser fights against over-generalizations, breaking them down only to rebuild them in another form. Perhaps if Prosser publishes another book on this topic, after reading the autobiographies written after *Second Skin's* publication, he would find different conclusions. After all, he was limited by the materials and personal experiences he had. In our rapidly changing world, it is difficult but necessary to be constantly reevaluating past beliefs.

At first glance, it may seem that Prosser represents the older group of men and Halberstam the younger. This would imply that some sort of change has occurred over time regarding how transsexuals understand their bodies or perhaps how society views gender. However, this is not the case, there is no apparent time connection between applicability of the theories and the autobiographies. Only a few of the men described their transsexuality as something they had not been aware of for their entire lives, and only two of the men use transman, instead of man to identify themselves, since they felt like they were different from biological men.²⁸⁵ Even Beatie, who arguably is the most provocative FTM to write an

²⁸⁵ Beatie, (2008); Cummings (2006); Green, (2004); Johnson, et al. (1982); Kailey, (2005); Khosla, (2006); Martino, (1977); Paris, (2006); Rees, (1996); Valerio, (2006)

autobiography (since he felt comfortable having a baby, something so traditionally and biologically female after his transition), describes himself as a man.

6.2. TOWARDS A NEW TRANS THEORY

A new trans theory is needed. At this time, Halberstam and Prosser's theories about FTM transitional narratives question pre-conceived notions of sex and gender, but exclude those who feel they do fit into a binary gender system despite their transsexuality. Currently, with Prosser and Halberstam, those reading trans theory are either offered a strict representation of FTM transsexuality with little room for variation or a deconstruction of FTM transsexuality that excludes as many people as it includes. A new trans theory needs to be all-inclusive, or develop further subcategories of sex and gender identification. Due to the amount of variation among people, it seems impossible to create a trans theory that will be more comprehensive of FTM narratives. At the same time, further classifications and designations for people can, on the one hand, give one the confidence of having an appropriate category with which to define one's self, and on the other imply that everyone needs to fit into a nice pigeon hole from which they cannot stray. However, for my proposal of a new trans theory, all that is needed are the categories of transsexual and transgender. Among subcultures, those who feel they need further differentiation can give themselves more definitive labels. However, based on the men from these autobiographical narratives, it seems that these terms, while limiting, give men the sense of identification without feeling too restricted. For those who identify as men and feel confident with that distinction, they are free to identify as transsexual and/or man. For those who feel that their gender is not represented by the term man, or who feel that they will always identify by their transition, they can use the term transgender or transman (as Kailey and Paris do).

A new trans theory must consist of more than just qualifying names and categories. It must also give a wide understanding of FTM trans experience. It must describe how youths feel growing up as a transsexual and how adults can discover their trans identity later in life. It must include a description of the process of coming out, the wide variety of ways that people choose to express themselves to loved ones and what the difficulties of transitioning one's appearance from one gender perception to another are. SRS will always be a focal point of trans theory because the process of changing one's body is so crucial for some transsexuals and especially provocative to non-transsexuals. New trans theory should describe how SRS can be a great help for some to express their manhood physically, while

making it clear that men and transmen need not undergo extensive SRS to be perceived, accepted and confident individuals. A new trans theory should pick up where Prosser and Halberstam leave off. It should discuss the nature of identity post-transition. Whether that be a transition to a man who has all his legal documents changed to say “male,” and all the surgeries possible to physically look like a traditional man or a transition to a person with mixed gender documentation, only taking testosterone injections or having some SRS. Such advancement in trans theory needs to engage those who love transsexuals, who are attracted to them and find them to be perfect partners despite, because or without consideration of their birth anatomy. It is crucial to trans theory to discuss how trans people can be confident in their identities, regardless of how that may manifest, in a world where so much is dictated by how one looks under one’s clothes. While I cannot offer a clear and definitive new trans theoretical view point, based on the empirical material in this thesis these are the qualities that need to be included in order to look at FTM transsexual narratives critically and respectfully.

6.3. CLOSING THOUGHTS

This thesis has investigated whether the current theories of female-to-male (FTM) transsexuality, by J. Halberstam and Jay Prosser, are applicable tools for helping us to understand how sex and gender manifests itself in FTM transsexuals, as represented in these narratives. These theories were engaged in a debate with autobiographies of ten FTM transsexuals’ life stories to discover whether they actually helped one understand FTM narratives as they claimed to do. By finding the five focus areas and analyzing the theories in relation to them, I was able to show that a new trans theory is needed in order to fully engage and represent FTM narratives, since the theories of Halberstam and Prosser are incomprehensive of FTM transsexual autobiographies. Using this analysis, I have discussed what characteristics a new trans theory needs to include in order to better represent, educate and more helpfully engage in debates on sex and gender in respect to transsexuality. Throughout this thesis, I have learned much about how FTMs represent their lives, the struggles they overcome and the characteristics that make them just as complicated and difficult to generalize as any other group in human societies.

While doing this research, I also came across several questions that would be interesting to engage in further. For example, how does the GID diagnosis process affect the transsexual’s view of himself? Actively interviewing FTM transsexuals who have written

autobiographies and who have not, comparing the information given in an interview with that which is published, would also be interesting. Since several of the men had difficult relationships with their fathers, research should be done exploring this occurrence and how it affects the kind of man or transman that the individual becomes (while staying away from the implication that a bad father-daughter relationship can “turn” someone into a transsexual). The field of transsexual research is still new and developing, there are many interesting parts of these narratives that can be delved into further. However, what one should take away from this thesis is that despite differences in sex and gender formation, these people are, like the rest of the world, trying to create an identity that they not only feel comfortable with as a representation of themselves, but also one that they can be proud of, which is no small feat for anyone.

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