

‘Nature’s Cruel Mistake’:

Representations of Transsexual Experience in Twentieth-Century Autobiographies

Bethany Phillips-Peddlesden
Honours,
University of Melbourne

In his famous declaration that ‘anatomy is destiny,’ Sigmund Freud encapsulated the idea that a person’s body defined their subjectivity and relationship to others in society.¹ In this construction, gender is a binary division of physical characteristics and resultant stable social and sexual behaviours and norms that clearly separate men and women. However, such dichotomous views are challenged and subverted by non-normative expressions of gendered identity, as well as feminist and queer theory deconstructions of the historical specificity of seemingly universal gender and sexual categories.² One controversial expression of gendered identity has been that of the ‘transsexual,’ who declares that their sense of gender does not ‘match’ their physiological sex. Whilst there have been numerous historical figures who for various reasons chose to present themselves in public as the ‘opposite’ gender, medical developments made during the early twentieth century allowed some transsexuals to much more radically alter their bodies.³ This article will discuss the experiences of three British and American transsexuals who utilised these new hormonal and surgical techniques to transform their sexed bodies in an attempt to attain a ‘normal’ life in their gender of choice. Michael Dillon, Roberta Cowell and Christine Jorgensen all struggled through a period of social, sexual and physical unintelligibility in their quest to correct what they saw was ‘nature’s cruel mistake’ and renegotiate their social and personal gendered identities.⁴ Through an analysis of the ways in which they represented and understood their own

¹ Sigmund Freud, ‘The Dissolution of the Oedipal Complex’ in *On Sexuality: Three Essays on the Theory of Sexuality, and Other Works*, ed. Angela Richards, (New York; Penguin, 1976), 320.

² For an interesting argument on the necessity to see gender as an historiographic category of analysis see Joan Wallach Scott, *Gender and the Politics of History*, (New York: Columbia University Press, 1999). For an overview of the essentialising perspective of sexuality see Carol S Vance, ‘Social Construction Theory: Problems in the History of Sexuality,’ in *Homosexuality, Which Homosexuality?: International Conference on Gay and Lesbian Studies*, ed. Dennis Altman et. al., (London: GMP, 1989).

³ Whilst an important aspect of feminist, queer and race politics has been to rediscover the lived experiences of women and minority groups throughout history, it is necessary to be cautious of the retrospective reading of current gendered and sexual understandings onto earlier expressions of subjectivity and embodied experience.

⁴ Bonnie Bullough and Vern Bullough, ‘Transsexualism: Historical Perspectives, 1952 to Present,’ in *Current Concepts in Transgender Identity*, ed. Dallas Denny, (New York: Garland Pub, 1998), 15.

transitions within autobiography, it is possible to interrogate the productive place of gender in the construction of performative practice, subjectivity, embodied experience and sexuality. A comparative study of these three accounts of transsexual experience will also provide important insights into how twentieth century understandings of gender and sexuality were both challenged and reinforced by such attempts at gender transformations within Western society.

‘Transgender’ has replaced ‘transsexual’ in current practice and theory in recognition that the term relates to changing physical, social and psychological expressions of gender that are not necessarily related to sexual orientation or practice.⁵ However, while current theorists, as well as those who self-identify as transgender, have moved away from the term transsexual, this article will use the older term transsexual in order to delineate the historically specific use of the word during the period being examined. When transsexual people first came to the attention of Western medicine and society, they were understood within a continuum between ‘normal’ and ‘deviant’ social and sexual behaviours that saw sexuality and gender to be inextricably linked and based on innate physical differences.⁶ In contrast, this article takes as a starting point the feminist challenge that biological and physiological characteristics (sex) are actually distinct from understandings of behaviour and meaning for males and females, constructed through various social systems and discourses within particular historical contexts (gender).⁷ Likewise, embodiment here is defined as the subjective experience of becoming a lived body within a particular society. Life is always experienced through one’s particular body in a particular time and space and, as such, ‘embodied practices are always contextual, inflected with class, ethnic, racial, gender and generational locations’.⁸ This analysis of subjectivity, embodiment and transsexuality will engage with Judith Butler’s influential conception of the performative and productive social regulation of gender as enacted on and through the body, as well as her discussion of the construction of the ‘human’ through specific ‘ways of knowing, [and] modes of truth, that forcibly define intelligibility’.⁹ That is to say, gender frames how one’s body is experienced, presented, read and understood and one of the core criteria for being recognized as human is having an identifiably gendered body. In discussing the subjective and embodied experiences of transsexual people through their autobiographies, it is important to balance respect for the ways in which they saw and chose to represent their own experiences with analysis of the influence of the particular historical frameworks through which they interpreted their lives. Furthermore, in an attempt at clarity, and whilst recognising the problematic nature of doing so, all references to transsexual people in this article will use the pronoun that relates to their corresponding physical sex characteristics during the time being discussed.

In his unpublished autobiography, *Out of the Ordinary*, Michael Dillon records the moment of epiphany in the early 1930s in which, as seventeen-year-old Laura Dillon, she fully realised that people read her body as female and would treat her as feminine:

⁵ Terrell Carver, ‘“Trans” Trouble: Transexuality and the End of Gender,’ in *The Future of Gender*, ed. Jude Browne, (Cambridge, UK: Cambridge University Press, 2007), 129.

⁶ Lisa Disch, ‘Judith Butler and the Politics of the Performative,’ *Political Theory*, Vol. 27, No. 4 (1999), 548.

⁷ Julian Todd Weiss, *The Gender Caste System- Identity, Privacy and Heteronormativity*, (Tulane: Tulane Law School, 2001), 125.

⁸ Kathleen Canning, ‘The Body as Method? Reflections on the Place of the Body in Gender History,’ *Gender and History*, Vol. 1, No. 3 (November 1999), 505.

⁹ Judith Butler, *Undoing Gender*, (New York : Routledge, 2004), 57.

It was a horrible moment and I felt stunned. I had never thought of myself as [female] despite being technically a girl...People thought I was a woman. But I wasn't, I was just me.¹⁰

Laura Dillon was born in Britain in 1915 and raised by autocratic aunts along with her older brother in Folkestone, Kent. The daughter of an Irish Baronet, she attended religious girls schools before moving to Oxford to begin university.¹¹ During the 1930s, upper-class British universities enforced strict quotas for female students and restricted their participation in university and sporting activities in an attempt to ensure consistency with 'feminine standards'.¹² However, at Oxford, Dillon joined the girls rowing team, cut her hair short and wore as 'masculine' clothing as she dared in an attempt to express her own sense of gender.¹³ The recent publication of *The Well of Loneliness*,¹⁴ a controversial novel with a lesbian kiss, had publicised the possibility of same-sex attraction and helped to 'nurture a new gay subculture' in Britain and America.¹⁵ The style of clothing adopted by the protagonist was an identifiable expression of non-normative sexuality that some same-sex attracted women, including Dillon, chose to emulate. The author, Radclyffe Hall, lived openly as a same-sex attracted woman and also dressed as a man. Being an independently wealthy woman allowed her to transgress social norms without society being able to effectively censure her. That Dillon was also wealthy, and as such able to afford the testosterone she later took and the education she acquired, testifies to the impact of class on gender norms and the lives of transsexuals.¹⁶ However, while Dillon was attracted to women and assumed by many to be a lesbian, she did not identify as such. A lover would be attracted to her as a woman, which she did not feel herself to be. Instead, in 1938 she began experimenting with self-administered testosterone, given to her by a doctor who, however, refused to administer the drug or provide further advice.¹⁷ Over the next few years, Dillon underwent a process of transformation under the influence of these hormones, growing a beard and becoming more muscular.¹⁸ During the Second World War she worked in a garage and wrote what Pagan Kennedy described as 'one of the few books in the world' on transsexuals; referring throughout to 'these people' as no appropriate terminology yet existed.¹⁹

10 Michael Dillon, 'Out of the Ordinary (Unpublished Manuscript),' in *The First Man-Made Man: The Story of Two Sexes, One Love Affair, and a Twentieth-Century Medical Revolution*, ed. Pagan Kennedy (New York: Bloomsbury, 2007), 31. The manuscript of *Out of the Ordinary* is largely reproduced in Kennedy's *The First Man-Made Man*. However, not all of it has been included and as such, may in some ways limit this article's analysis.

11 Kennedy, *The First Man-Made Man*, 19-27.

12 Brian Harrison, *The History of the University of Oxford: The Twentieth Century*, (Oxford: Clarendon Press, 1994), 34.

13 Dillon, 'Out of the Ordinary,' 44.

14 Radclyffe Hall, *The Well of Loneliness*, (New York: Anchor Books, 1990).

15 Kennedy, *The First Man-Made Man*, 27-9.

16 Both Cowell and Jorgensen were also in a financial position to be able to afford the expensive hormone treatments and surgery. Judith Butler discusses the contemporary issue of class in relation to transgendered people and the cost of surgery in *Undoing Gender*, although this article cannot explore the issue in great depth.

17 Dillon, 'Out of the Ordinary,' 38, 51. Whilst at the time women were sometimes given testosterone for various illnesses, Dillon was the first recorded person to take hormones with the intention of changing her sex instead of just regulating her hormones. Kennedy, *The First Man-Made Man*, 29.

18 *Ibid*, 51. The development of hormones was originally intended to assist with regeneration and enhancement of characteristics of born sex. During the 1930s and 1940s its effects were still relatively unstudied and unknown. For information on some early views and experiments on hormone therapy see Eugen Steinach, *Sex and Life: Forty Years of Biological and Medical Experiments*, (College Park, MD: McGrath Publishing Co., 1970).

19 Kennedy, *The First Man-Made Man*, 15.

In *Self: A Study in Ethics and Endocrinology*, Dillon argued that people like himself were otherwise 'ordinary' and only trapped in the wrong sexed body, needing hormones and surgery so their body could fit their mind.²⁰ Following a brief hospitalisation during this period, Dillon was referred to Dr Gillies, one of the few plastic surgeons that existed in Britain at that time. Gillies agreed to help in this project to change Dillon's body to fit her mind. Consequently, between 1946 and 1949, whilst studying medicine and living as Michael Dillon, Laura underwent a series of at least thirteen operations including a mastectomy and phalloplasty (the first recorded operation to fully construct a penis in a female to male sex change).²¹ Using a fictitious diagnosis of hypospadias to disguise the truth,²² Dillon was given a medical certificate which, along with the hormones and surgery, allowed him to be officially reregistered as Lawrence Michael Dillon and begin life as an 'ordinary man'.²³ In fact, as an 'ordinary man', he reregistered himself as the next in line to his brother's title, which later led to his 'outing' as a transsexual man.²⁴ Before this however, his past as a woman became a strictly guarded secret. One of the few people Dillon did confide in was Roberta Cowell, who contacted him after having read *Self*.²⁵ Robert Cowell, a racing car driver and fighter pilot, spent the majority of the Second World War as a prisoner of war in a German camp.²⁶ After his release, he went into business as an engineer, began dressing as a woman in secret sometime during the later 1940s and divorced his wife in 1948.²⁷ Following a bout of depression, Cowell sought advice from a psychiatrist, believing the 'underlying cause of [his] unhappiness was sexual'.²⁸ Writing her autobiography after her transition, Roberta Cowell wrote that the tests revealed that the 'unconscious mind was predominantly female...which all my life I have known of and severely repressed'.²⁹ Consequently, Cowell began taking oestrogen and changed jobs to one he considered more appropriate to his desired gender. When he met Michael Dillon in 1950 he was an androgynous figure, not knowing how to take his transition further.

In her biography of Michael Dillon, Liz Hodgkinson reveals that following their meeting in 1950 Dillon fell in love with Cowell, writing many love letters to him. At some point during this time he also illegally performed the castration surgery on Cowell that later Dr Gillies notes has been carried out.³⁰ Until the mid-1960s it was prohibited in Britain to carry out castrations, due to an old law that protected the bodies of potential soldiers.³¹ For years after sex change surgery had

20 Michael Dillon, *Self: A Study in Ethics and Endocrinology*, (London: William Heinemann Medical Books, 1946).

21 Liz Hodgkinson, *Michael Née Laura*, (London: Columbus Books, 1989), 85. Sir Harold Gillies and Dr. D. Ralph Millard, *The Principals and Art of Plastic Surgery*, vol. II (Boston: Little Brown, 1957), 384. Dillon appears in this book as the patient 'Female with Male Outlook'.

22 Reginald Pound, *Gillies: Surgeon Extraordinary*, (London: Michael Joseph, 1964), 26.

23 Dillon, 'Out of the Ordinary,' 54.

24 The reaction to the possibility that Dillon might inherit the title illuminates other gendered power dynamics, as there were fears that other women might follow Dillon's example and become men in order to gain socially or financially from male privilege. For a discussion of this aspect of female to male transsexuality see Jason Cromwell, *Transmen and FTMs: Identities, Bodies, Genders, and Sexualities*, (Chicago: University of Illinois Press, 1999), 34.

25 Hodgkinson, *Michael Née Laura*, 88.

26 Roberta Cowell, *Roberta Cowell's Story, by Herself*, (New York: British Book Centre, 1954), 10-2, 23-5.

27 Gillies, *The Principals and Art of Plastic Surgery*, 385.

28 Cowell, *Roberta Cowell's Story*, 38.

29 *Ibid*, 40.

30 Hodgkinson, *Michael Née Laura*, 89. This is despite Dillon only being a medical student at that point and not yet a qualified doctor or the fact that he would lose any chance to practice medicine if caught. Hodgkinson also notes that Cowell rejected Dillon's marriage proposal, after which he never mentioned her or wrote to her again.

31 David King, *The Transvestite and the Transsexual: Public Categories and Private Identities* (Aldershot: Avebury, 1993), 54.

begun being performed, it was necessary for male to female transsexuals to go overseas (such as to Denmark) to have their testicles removed.³² Dillon also referred Robert Cowell to Dr Gillies, who in 1952 completed the first male to female sex change operation in Britain on him.³³ Like Michael Dillon, Roberta Cowell then attempted to eradicate her past life, presenting herself as ‘physically, psychologically, glandularly, and legally’ a woman.³⁴ However, in 1954, fearing her secret would be exposed, Roberta decided that, like Jorgensen, she would tell her own story to the newspapers and subsequently write her autobiography.³⁵ The Christine Jorgensen story, which broke in 1953, was the first publicised sex change in America (or Britain) and one of the first forty on record. The news created considerable interest and hostility; the exclusive of her story in the *American Weekly* increased circulation of the magazine dramatically and was translated into 14 languages.³⁶ George Jorgensen was a young American soldier who, in the late 1940s, walked into a drugstore and asked for oestrogen, after reading about the new hormone synthesis in a book.³⁷ Subsequently, hearing of medical options not available in America, Jorgensen traveled to Copenhagen where he went through physical and psychological evaluations and more hormone therapy. Following this, he had his testes removed in 1952 and penis in 1953 by Dr Christian Hamberger.³⁸ Danish law at this time also placed restrictions on castration, but under the *Sterilisation and Castration Act* of 1935, Hamberger was able to operate if the patient’s sexuality ‘involved mental disturbances to a considerable degree’.³⁹ Following the publication of Jorgensen’s case, Hamberger received a total of 465 letters from people who wanted similar sex-change operations as well as many more deploring the surgery.⁴⁰ The intense interest and hostility generated by this first public account of transsexualism illustrates the importance of, and the social investment in, binary constructions of gender categories and specific ways of understanding the possible ways of being human.

The articulation of gender as distinct from sex in Western society can be traced to the early-mid twentieth century, in such theories as that of J. Money, who made the distinction in his work with intersex children.⁴¹ This work maintained a view of two stable, discrete gender categories, but claimed that they are distinct from birth sex characteristics. In this ‘medical lexicon’, surgical and hormonal interventions to match sex characteristics to the prescribed gender, in conjunction with early and consistent socialisation and repetition and reinforcement of gendered behaviours, could determine the gender of a child.⁴² Whilst such work with intersex children proved highly

³² *Ibid.*

³³ Cowell, *Roberta Cowell’s Story*, 137.

³⁴ *Ibid.*, 4.

³⁵ Kennedy, *The First Man-Made Man*, 103.

³⁶ Jonathan Ames, *Sexual Metamorphosis: An Anthology of Transsexual Memoirs* (New York: Vintage, 2005), 55, 34.

³⁷ Christine Jorgensen, *Christine Jorgensen; Personal Autobiography* (New York: P. S. Eriksson, 1967), 77.

³⁸ Bullough and Bullough, ‘Transsexualism,’ 15-16. Despite the media reports, she did not have the vaginal construction surgery until later, back in America.

³⁹ *Danish Sterilisation and Castration Act*, (May 11 1935) in Denny, *Current Concepts in Transgender Identity*, 16. It is interesting to note that Hamberger stated later that through his surgery he only created the external illusion of a sex change, as Jorgensen’s chromosomal sex remained the same. See Hamberger, ‘Transvestism: Hormonal, Psychiatric and Surgical Treatment,’ *The Journal of the American Medical Association*, Vol. 152, No. 5 (1953), 391-396.

⁴⁰ Bullough and Bullough, ‘Transsexualism,’ 16. In response to this interest, Denmark restricted surgery like Jorgensen’s to only be applicable to Danes: ‘Denmark Curbs Chris Surgery 1953,’ in Ames. *Sexual Metamorphosis*, 60.

⁴¹ See for example John Money and Anke A. Ehrhardt, *Man and Woman, Boy and Girl: The Differentiation and Dimorphism of Gender Identity from Conception to Maturity*, (Baltimore MD: John Hopkins University Press, 1972). For a comprehensive history of Money’s work and influence, see Sandra Eder, ‘The Volatility of Sex: Intersexuality, Gender and Clinical Practice in the 1950s,’ *Gender and History*, Vol. 22, No. 3, (November 2010), 692-707.

⁴² Tracie O’Keefe and Katrina Fox, *Finding the Real Me: True Tales of Sex and Gender Diversity* (San Francisco: Jossey-Bass, 2003),

problematic, the premise that sex and gender are distinct categories was appropriated by the new feminist movement and later by queer and transgender theory.⁴³ Gender came to be theorised as ‘a primary way of signifying relationships of power’ and the essentialist view of sexuality and gender as the ‘invariable result of the body, biology or an innate sex drive’ was increasingly challenged.⁴⁴ The feminist Judith Butler was one such theorist. Her influential work on the performativity of gender situated the sexed body within historically specific gendered discourses enacted on and through the body via a ‘ritualised repetition of norms’.⁴⁵ The signifiers and acts of masculinity and femininity (dress, comportment etc) constitute gender, and their seemingly ‘innate’ differences are only constructed as such through repeated performance and the language of assumed naturalness within regulatory discourses in society.⁴⁶ In this conceptualisation of performativity, Butler notes that gender is not experienced as a matter of daily choice by a subject, but is what allows the subject to be and understand its own gender:

This iterability implies that ‘performance’ is not a singular ‘act’ or event, but a ritualized production, a ritual reiterated under and through constraint, under and through the force of prohibition and taboo, with the threat of ostracism and even death controlling and compelling the shape of the production, but not, I will insist, determining it fully in advance.⁴⁷

These processes of regulative gender performativity, as well as the possibility for the subversion of gendered binaries, can be noted in the autobiographies of Michael Dillon, Roberta Cowell and Christine Jorgensen. During the early stages of their transition, after they began taking hormones, each noted the hostility and confusion caused by their blending of masculine and feminine gender attributes. During the mid -twentieth century, traditional gender roles, the division of labour and importance of the nuclear family all reiterated strong gendered binaries in appearance and behaviour.⁴⁸ This insistence of separate gendered behaviours can in part be attributed to a backlash against the disruption to stable gender roles caused by the Second World War. The social regulation of such gendered behaviour is clear when Dillon notes that not only will people notice short hair on a girl, or her particularly masculine appearance, but they will feel the necessity to comment on and censure her for not properly performing her femininity. For example, she noted that children and old ladies were particularly likely to abuse her for her incoherently gendered appearance.⁴⁹ Similarly, in *Self* she complained of the people who constantly ‘gaze after [transsexuals] and loudly voice the question ‘Is that a man or a girl?’⁵⁰ Roberta Cowell also singled out old women and children as the most likely (but definitely not only) people to comment on her gender inappropriate

ix. Whilst the similarity to transsexuality of this conception is clear, the main difference is that of choice; intersex children’s gender was chosen and imposed by doctors and parents, and often the child was never informed.

⁴³ In a discussion of Dr Money’s most famous case of Brenda/David, Butler notes that in their insistence on the stability of David’s assigned identity, ‘[m]alleability is, as it were, violently imposed. And *naturalness* is artificially induced’. Butler, *Undoing Gender*, 66.

⁴⁴ Scott, *Gender and the Politics of History*, 42, 13.

⁴⁵ Judith Butler, *Bodies That Matter: On the Discursive Limits of ‘Sex’*, (New York: Routledge, 1993), x.

⁴⁶ Judith Butler, *Gender Trouble: Feminism and the Subversion of Identity* (New York: Routledge, 1999), 71-90. For a discussion of the regulative discourses of gender specifically in a transgendered context see Carver, ‘“Trans” Trouble: Transsexuality and the End of Gender,’ 124-5.

⁴⁷ Butler, *Bodies That Matter*, 95.

⁴⁸ Stephanie Spencer, *Gender, Work and Education in Britain in the 1950s*, (Basingstoke: Palgrave Macmillan, 2005), 34-45.

⁴⁹ Dillon, ‘Out of the Ordinary’, 5.

⁵⁰ Dillon, *Self: A Study in Ethics and Endocrinology*, 51.

clothing, hair and body language.⁵¹ On the other hand, in the case of Christine Jorgensen, newspaper headlines are not sure whether to be more outraged that she was dressing as a woman or that she was able to ‘impersonate’ a woman so well.⁵²

Following the completion of their transitions, and whilst living permanently in their preferred gender, Cowell and Jorgensen strongly reiterated the importance of physically enacting their new gender. The transgender theorist Sandy Stone notes the complicity of these mid twentieth century male-to-female transsexuals in ‘a Western white male definition of performative gender’.⁵³ Both Cowell and Jorgensen’s autobiographies constantly discuss their rehearsal of the ‘correct’ ways of dressing, grooming, moving and interacting as women, becoming ‘absorbed in the details of correct dressing and deportment, of beauty treatment and of hairdressing’.⁵⁴ In contrast, Dillon reiterated her violent aversion to women’s clothing, wearing as much masculine apparel as possible from an early age as a necessity not choice: ‘I could not do other than I did’.⁵⁵ However, she too placed much importance on specific masculine ‘props’, such as the pipe and wearing a uniform to express her sense of (male) subjectivity before her sex change.⁵⁶ The importance placed on clothing as a signifier of gendered identity at this time is evident in the ways in which all three transsexuals talk about their feelings towards gendered clothing and the reactions of others to the clothing that they wear.⁵⁷ Another aspect of early transsexual understandings and performance of gender can be seen in the idea of changing gender as traveling to another country. Christine Jorgensen described it as ‘descending into a new and alien world’.⁵⁸ Jay Prosser notes this tendency for early transsexuals to describe their transition as an acquisition of belonging through the learning of different customs and forms of dress, similar to the process of emigrating.⁵⁹ Such a trope clearly highlights the contradiction between their idea of innate gender identity and the necessity of rehearsing how to ‘be’ and present oneself as a particular gender.

While they did state the importance of genital change in becoming their preferred gender, both Cowell and Jorgensen had themselves reregistered, lived as and declared themselves to ‘be’ women before they had vaginoplasty operations.⁶⁰ As such, they placed significance on the performance, on being seen as women, above sex characteristics or not being men.⁶¹ Dallas Denny, in her discussion of Christine Jorgensen, notes the importance of the ability to *enact* femininity in understandings of early transsexuals. It is the very success of Jorgensen’s gender performance that confronts the

51 Cowell, *Roberta Cowell’s Story*, 103.

52 See for example ‘Ex-Gi Becomes Blonde Beauty’ quoted in Kennedy, *The First Man-Made Man*.

53 Sandy Stone was also a male-to-female transgendered woman. Sandy Stone, ‘The Empire Strikes Back: A Posttranssexual Manifesto’, in *Body Guards: The Cultural Politics of Gender Ambiguity*, ed. Kristina Straub and Julia Epstein, (New York: Routledge, 1991), 286.

54 Cowell, *Roberta Cowell’s Story*, 56.

55 Dillon, ‘Out of the Ordinary’, 44.

56 Kennedy, *The First Man-Made Man*, 5, 25, 32.

57 Stephen Whittle, ‘The Becoming Man: The Law’s Ass Brays’, in *Reclaiming Genders: Transsexual Grammars at the Fin De Siècle*, ed. Kate More and Stephen Whittle, (London: Cassell, 1999), 22.

58 Jorgensen, *Christine Jorgensen*, 166.

59 Jay Prosser, ‘Exceptional Locations’, in *Reclaiming Genders*, 91. This manner of describing transition is exemplified in Jan Morris’ *Conundrum* and evident in the autobiographies discussed in this article, especially Jorgensen’s. Jan Morris, *Conundrum*, (London: Faber, 1974).

60 Jorgensen, *Christine Jorgensen*, 167.

61 For example Cowell notes with pride her initial ability to pass convincingly as a woman: ‘I realized, with a sudden glow of pleasure, that my appearance was acceptable’. Cowell, *Roberta Cowell’s Story*, 56.

media and public; the fear was that with the newly developed technology, transsexuals could and *did* pass as their preferred gender.⁶² The term ‘pass’ further indicates the complexity of normative understandings of gender. In contrast to the obvious social importance placed on the correct appearance and behaviour of gender shown by reactions to early transsexuals’ ambiguous bodies, the fear of ‘passing’ at the same time saw transsexual deceit in *correctly* performing a gender. This revealed the belief that an innate quality was being denied by ‘pretending’ to be the ‘opposite’ gender. While they were censured for not performing the gender associated with their birth sex correctly, Dillon, Cowell and Jorgensen could not be accepted as their post-operative gender when their history was known, irrespective of how well their social roles, sexed body and gendered appearance conformed to social norms. As such, gender discourses were shown to work on a number of (sometimes contradictory) levels; constructed in discourse as innate, natural binary categories that at the same time need to be performed, ritualised and regulated according to historically specific standards.

According to Jason Cromwell, ‘clothing is a necessary condition of subjectivity’, as an expression of an embodied self.⁶³ Normative understandings within Western society viewed the subject as an autonomous agent whose sense of self was based on innate qualities which found expression through categories of identity, including sexuality and gender. However, the way individuals constructed this sense of self, and therefore their relations to others, was strongly influenced by social institutions and discourses and shaped by available ‘language and wider cultural codes’.⁶⁴ The modes of truth that frame the ‘human’ are constructed through social relations of power and a process of legitimation and exclusion that defines ‘what social norms must be honoured and expressed for “personhood” to become allocated’.⁶⁵ One of the main frames of human intelligibility in the twentieth century was that of a stable, oppositional gender identity. Social interactions were guided by such categories of ‘truth’; if a person’s gendered expression did not conform to the norms of intelligibility then relationality would break down and the person become unreadable, unrelatable and, as such, not properly human.⁶⁶ Transsexuals challenged these boundaries of human subjectivity by not conforming to one stable gender identity with bodies that confused attempts to read them along the binary of normative sex and gender. Furthermore, with the recently developed medical technology, for the first time gender ambiguity could not be resolved through reference to the sexed body - in a challenge to the essentialist view of gender, now the body too could ‘lie’. In their autobiographies, Dillon, Cowell and Jorgensen all recorded the difficulty people had in interacting with them without the frames of reference provided by oppositional gender categories. The subversion of the gender binary by transsexuals’ unintelligible bodies therefore prompted hostility and attempts to define and coerce normative gender expressions. As such, Dillon’s family attempted to force her to adopt normative feminine dress and behaviour, their anger prompted by her blending of gendered behaviour and dress and by people’s demands to know which gender she was.⁶⁷ The importance of normative modes of ‘truth’ and available language in the construction of identity was also evident in the extreme difficulty she had in articulating her own sense of non-normative gender; the word for what she was had not yet been

62 Dallas Denny, ‘Black Telephones, White Refrigerators: Rethinking Christine Jorgensen’, in *Current Concepts in Transgender Identity*, 39.

63 Cromwell, *Transmen and FTMs*, 34.

64 Paul Du Gay et al., *Identity: A Reader*, (London: SAGE Publications in association with The Open University, 2000), 10.

65 Butler, *Undoing Gender*, 58.

66 Michel Foucault, *The History of Sexuality*, trans. Robert Hurley. (London: Penguin, 1990). Butler, *Undoing Gender*, 41.

67 Dillon, ‘Out of the Ordinary’, 5, 44, 54. and Dillon, *Self: A Study in Ethics and Endocrinology*, 51.

invented.⁶⁸ Cowell also described how people felt entitled to express their disapproval of his gender ambiguity – '[t]hey had no hesitation in making their attitude abundantly clear, perhaps because they considered that I had no feelings at all, perhaps because they wanted to hurt me as much as possible'.⁶⁹

While Dillon and Jorgensen both had non-normative understandings of their identity, in that they believed their subjective gender was not a natural expression of their sexed bodies, their conceptualisations of gendered subjectivity were still shaped by a relation to these historical norms.⁷⁰ Before her sex change, Dillon believed her identity to be that of a 'normal' man, it was her body which was wrong. Similarly, Jorgensen stated that from an early age he knew himself to be a woman, with a woman's interests and abilities, only mistakenly born with male sex characteristics.⁷¹ As such, they reinforced an 'oppositional mode of gender identification', and believed themselves to be transgressive only in that their bodies had the wrong sex characteristics.⁷² In contrast, in her autobiography Roberta Cowell represents herself as having always been (even if in an abnormal manner) a woman. She stated that the trauma of being a prisoner of war caused her dormant female glands to become active, prompting her to discover the 'truth' about her body which explained her mental 'femininity'.

'Once I realized that my femininity had a *physical* basis I did not despise myself so much. I now knew, of course, that I was physically abnormal, but I could accept a degree of involuntary femininity without losing self-respect.'⁷³

For Cowell, it was therefore necessary to normalise the physical expression of her innate feminine subjectivity through hormones, a change in job and an 'operation to correct the congenital absence of [a] vagina'.⁷⁴ Following her transition, Cowell also noted a number of changes in herself that reinforced normative understandings of gender difference, including losing initiative, assertiveness and personal drive, changing her appetite, developing a 'maternal instinct' and intuition and identifying with the heroine in movies.⁷⁵ While she could not name the doctor who 'discovered' she had always been a woman, the important point here is that in order to understand and accept her desire to 'be' a woman, Cowell needed to find a physical basis for her gendered identity in order to accept and understand it within the Western social norms of gender.⁷⁶ As such, Cowell, Jorgenson and Dillon did not challenge what masculine and feminine behavior was or meant at that time; they simply believed their minds and bodies were the opposite genders.

In *Gender Trouble* Judith Butler states that '[b]odies cannot be said to have a signifiable existence prior to the mark of their gender'.⁷⁷ The subjective experience of embodiment is constituted through

68 Such as the need to use 'these people' to describe transsexuals throughout her book *Self: A Study in Ethics and Endocrinology*.

69 Cowell, *Roberta Cowell's Story*, 52.

70 Butler, *Undoing Gender*, 42.

71 Dillon, 'Out of the Ordinary', 31, Jorgensen, *Christine Jorgensen*, 71-2.

72 Stone, 'The Empire Strikes Back: A Posttranssexual Manifesto', 286.

73 Cowell, *Roberta Cowell's Story*, 6, 41-2, 45,

74 *Ibid*, 55.

75 *Ibid*, 45, 48, 60.

76 In fact, according to Pagan Kennedy she was notorious for lying about her medical history and could never substantiate any claims that she made regarding the 'physical' basis from birth of her femininity. Kennedy, *The First Man-Made Man*, 112. As a part of this equation of sex with gender, Cowell notes later that she never really regarded Dillon as a man, despite his sex change. Hodgkinson, *Michael Née Laura*, 87.

77 Butler, *Gender Trouble*, 8.

cultural norms and ideals and materialised through the possible ways of speaking of, defining, understanding and therefore experiencing the surfaces of the body and its social interactions and relationality.⁷⁸ As such, physical anatomy cannot be conceived outside of the social ways of knowing the body. Even if the body is experienced differently, it is experienced in contrast to that ideal. Therefore, Dillon, Cowell and Jorgensen understood and expressed their sense of embodiment as a negation of the normative experience of being a sexed and gendered body. They did not experience their body as matching their mind, and consequently believed something had gone wrong in the 'natural' relationship between (normal sexed) body and (normal gendered) mind. If the experience of the body was not mediated through culture, a disjunction between subjectivity and the experience of the lived body would not be possible. Transsexuality highlights the constructed nature of normative links between gender, the body and the formation of subjectivity as well as the constructed nature of masculinity and femininity as they are lived and understood by the sexed subject. To claim embodiment is influenced by social systems and frames of knowledge is not to claim that the body is only experienced through language and culture or that bodily social norms cannot be subverted or challenged. Nor is it to claim that the body is irrelevant; or even that embodiment is not experienced differently by different people within the same cultural constructs.⁷⁹ What it means is that both what we *think* and what we *feel* about our bodies are in some ways mediated by the social; we cannot ever access an unmediated pure sense of bodily self outside of culture. A body also cannot ever fully exemplify a gendered ideal, but must discipline and attempt to approximate or resist the changing definition of the proper masculine or feminine body; embodiment is always in the process of becoming/being a lived body.⁸⁰

During the twentieth century in Britain and America, social discourses equated sex with gender and gender with sexuality using a binary understanding of heterosexual desire. This 'heterosexual matrix' saw a causal link between the sexed body, gender and desire: one either was a particular gender, or was attracted to it.⁸¹ Homosexuality was therefore a deviant, inferior 'other' in discourses of sexuality and gender. These discourses encompassed sex differences, gender, reproduction, morals and acts and attempted to both produce and constrain social realities, power relations and forms of knowledge.⁸² This construction meant that as sexuality was linked to gender, a homosexual man must therefore be closer to being a woman than a 'normal' man, and vice versa for lesbians. Such a view was expressed by an early paper on transsexuality by Richard von Kraft-Ebing, 'Psychopathia Sexualis with Special Reference to Contrary Sexual Instinct', which linked transsexuality to transvestism and homosexuality.⁸³ The influence of such discourses on the subjects of this article is evidenced by the pointed 'disarticulation of the question of sexual desire from the question of gender' within their autobiographies.⁸⁴ For example, Michael Dillon noted that there were two reasons he had had the sex change: 'that he felt he was a male soul imprisoned in a female body...[and] that he had been sexually attracted to women and believed this to be wrong'.⁸⁵

78 Carrie Noland, *Agency and Embodiment: Performing Gestures/Producing Culture*, (Cambridge, Mass.: Harvard University Press, 2009), 172. Kate Cregan, *The Sociology of the Body: Mapping the Abstraction of Embodiment*, (London ; Thousand Oaks, Calif.: SAGE, 2006), 5.

79 Gayle Salamon, *Assuming a Body: Transgender and Rhetorics of Materiality*, (New York: Columbia University Press, 2010), 76.

80 E. A. Grosz, *Volatile Bodies: Toward a Corporeal Feminism*, (Bloomington, Ind.: Indiana University Press, 1994), 64-5.

81 Disch, 'Judith Butler and the Politics of the Performative,' 548.

82 Foucault, *The History of Sexuality*, 33.

83 Richard von Kraft-Ebing, *Psychopathia Sexualis with Special Reference to Contrary Sexual Instinct: A Medico-Legal Study* (Charles Gilbert Chaddock trans., F.A Davis Co., 7th ed. 1920), 230-304.

84 O'Keefe and Fox, *Finding the Real Me*, 65.

85 Sangharakshita, email to Pagan Kennedy, 29 January 2005 quoted in Kennedy, *The First Man-Made Man*, 145.

He also understood sexuality and gender to be inextricably linked to reproductive capacity, not dating women because 'one must not lead a girl on if one could not give her children'.⁸⁶ Similarly, Christine Jorgensen noted her sexual attraction to men and disapproval of homosexuality as a factor in her desire to become a woman.⁸⁷ Roberta Cowell also noted her aversion to homosexuality and carefully articulates a distinction between her (hetero)sexuality whilst living as a man, her lack of desire whilst transitioning and her (hetero)sexuality following her sex change: 'when my female libido developed, it was a perfectly normal one'.⁸⁸

In her discussion of transsexuality Judith Butler notes that people who display non-normative gender and sexual behaviours/subjectivities are used as a way to ultimately reinforce those same norms through the punishment or rehabilitation of those who transgress them.⁸⁹ The productive construction of 'normal' bodies within medical discourses involves the language of 'naturalness' and regulation of the normative body and mind; such as in the regularisation of intersex children and the pathologisation and strict controls on access to treatment for transsexuals.⁹⁰ Current treatment protocols for transsexuals follow strict guidelines and intersect with other institutions (such as the legal) in defining acceptable expressions of transsexuality and access to reregistration etc. However, during the early twentieth century, such controls did not exist, as 'transsexuality' was not yet a category to be regulated.

The term transsexual was popularised by Harry Benjamin, who must be included in any discussion of the history of transsexuality.⁹¹ Benjamin was one of the first to work with transsexuals after becoming interested in endocrinology. He developed the norms of treatment that would later become strict guidelines for diagnosis and treatment of transsexuals. After Christine Jorgensen's story brought the possibility of transsexuality to Western society's attention, she and Benjamin began corresponding, with Jorgensen referring people to Benjamin who contacted her in the hopes of getting the same treatment.⁹² Benjamin stated that since 'the mind cannot be adjusted to the body, the adaptation of the body to the mind seems not only permissible but indicated,' in an echo of Dillon's earlier and much less influential book.⁹³ Benjamin articulated the idea that transsexualism was not just a more obsessive form of transvestism, and that transsexuals should be treated with hormones and surgery so they could become 'normal' members of society.⁹⁴ Central to this need to normalise that became a part of the medical reaction to transsexualism was the 'presumed threat of sex transgression and homosexuality'.⁹⁵ By operating on early transsexuals such as the subjects of this article, doctors (and wider society) could ensure heterosexuality;

⁸⁶ Dillon, 'Out of the Ordinary,' 9.

⁸⁷ Jorgensen, *Christine Jorgensen*, 33.

⁸⁸ Cowell, *Roberta Cowell's Story*, 5.

⁸⁹ Butler, *Undoing Gender*, 52.

⁹⁰ According to Susan Kessler, the 'belief that gender consists of two exclusive types is maintained and perpetuated by the medical community in the face of incontrovertible physical evidence [in the form of intersex children] that this is not mandated by biology'. Susan Kessler, 'The Medical Construction of Gender: Case Management of Intersexed Infants,' *Signs*, Vol. 16, No. 1, (1990), 25. Carver, "'Trans' Trouble: Transsexuality and the End of Gender,' 125.

⁹¹ Benjamin attributes the first coinage of the word transsexual to David O. Cauldwell in 1949. David O Cauldwell, 'Psychopathia Transsexualis,' *Sexology*, Vol. 16, (1949), 274-280.

⁹² Jorgensen, *Christine Jorgensen*, 173.

⁹³ Harry Benjamin, 'The Nature and Management of Transsexualism with a Report on 31 Operated Cases,' *The Western Journal of Surgery*, Vol. 72, (1964), 110.

⁹⁴ Harry Benjamin, 'Transsexualism and Transvestism as Psychosomatic and Somatopsychic Syndromes,' *American Journal of Psychotherapy*, Vol. 8, No. 2, (1954), 45-6.

⁹⁵ Eder, 'The Volatility of Sex,' 692.

matching sex characteristics with norms of (hetero)sexual desire. The aim of such treatments, and those of Dillon, Cowell and Jorgensen, was to be normalised; the ultimate goal of transsexuals in the mid twentieth century was to be able to 'pass' all tests of subjective, social, sexual and physical 'normality' and to therefore be able to live as the gender they always knew themselves to be.

In Western society, gender and sex differences remain 'linchpins of the way we conceptualise ourselves and our culture'.⁹⁶ Identity, embodiment, sexuality and our ability to relate to others are all informed by the productive discourses of gender. In their autobiographies, Michael Dillon, Roberta Cowell and Christine Jorgensen expressed the belief that once they had transitioned they would become normal members of their society, conforming to social, sexual and physical standards of behaviour and identity as their new gender. They also demonstrated that there were many other categories which influenced their lives, such as class and race. Their need to transgress some gender norms and acceptance of others demonstrated both the productive power of gender discourses and the ability to subvert or resist historically specific understandings of gender. As such, the contemporary proliferation of transgender theories attests to the ability of people such as these to change social norms, as well as the continuing need to do so.

⁹⁶ Ruth Hubbard, 'Gender and Genitals,' in *Current Concepts in Transgender Identity*, 45.