

Invisible Genders in In the Family Magazine, November, 1998

By Arlene Istar Lev

Throughout history, homosexual desire and transgender behavior were seen as one and the same. Gender-deviant people—feminine men and masculine women—were assumed to be homosexual. When Mel came to see me 10 years ago, she embodied the very queer intersection of gender, identity and sexual orientation. At 23 years old, she was active in the lesbian community and lived with her partner of three years, Rose. A white woman with short brown hair and striking, hazel eyes, Mel showed up for her first appointment wearing flannel shirts, jeans and work boots. During the session, she was open with me, although impatient, as if she had told her story too many times to far too many social workers.

Mel explained that she had been sexually interested in other girls since early adolescence. When, at age 15, she confessed to her mother that she thought she was really a boy, her educated, liberal mom found a social worker who was experienced in working with gay adolescents. With her mother's support and the therapist's help, Mel came out as a lesbian and began dating other teenage girls, attending the local gay youth group, and getting involved in as many political and social aspects of the gay and lesbian community as her age would allow. Sneaking into gay bars from the age of 16, Mel became an alcoholic. She told me she had been sober for 18 months, was now in college and doing pretty well in her life. So why had she come to see me, I asked. Mel said, "I'm really not a lesbian. I still think I'm really a guy."

My first thought was that this was a case of internalized homophobia, albeit an unusual one. Denying her lesbianism sounded like the kind of internalized self-hatred I had heard numerous times from young lesbians struggling with their identity in a queer-hating world. But it didn't add up: Mel was blessed with a loving, supportive family, she had been through gay-affirmative therapy and had a strong social and sexual life in the lesbian community. She didn't exhibit overt signs of either self-hatred or homophobia; she didn't particularly mind the label of lesbian—she just didn't think it fit. Then I wondered if she was suffering from delusions that she was physically male, but Mel clearly understood that she had a female body. I asked if she was saying she wanted to become a transsexual, but Mel assured me that she didn't want to alter her body with hormones or surgery. As I sat with this likeable young person, I had to accept that there had to be another category where Mel fit. As she told me herself, Mel was "a female-bodied guy."

In the 15 years since I first met Mel, I have worked with many transgendered clients, but this first experience stretched my understanding of gender. No longer was my world neatly divided into males and females—two genders only, yin and yang. Now I was in a postmodern universe where gender is a perceived personal experience with potentially no relationship to one's biology. Mel knew herself to be physiologically female, but didn't identify with any definition of "woman"—even the most broadly defined, feminist version. Although sexually attracted to women, Mel didn't experience her desire as "woman-to-woman" sexuality because she experienced herself as a man. To describe herself, Mel used the term "transgendered lesbian," but those words, and the pronoun "she," are inadequate to describe the complexity of Mel's relationship to her body, her sexuality, her desire and her community. Female-bodied people who identify

with their masculinity, and are sexually attracted to other females sometimes call themselves transgendered lesbians, but there are many other words they use as well: butch, tomboy, stone butch, transgendered butch, s/he, boychick, bigendered, and mandyke. Transgendered lesbians often don't see themselves as women, and some don't see themselves as men; many prefer to identify as a third gender, which they call bigendered or other-gendered. Mel had been living as a lesbian because, in the words of psychotherapist Moonhawk River Stone, "The lesbian community was the closest thing to home I'd found . . . but was never really quite home." Mel had come to therapy to figure out where home was for her.

As a family therapist, I was interested in the impact of Mel's identity on her close relationships. I wondered what Mel's lover thought about Mel "being" a guy, and imagined some of the lesbians I knew who would find this reprehensible. Was Mel's gender dysphoria causing relationship difficulty, or challenging the sexual identity of her partner? Was Mel secretive about her feelings, or able to discuss them with her lover? I invited Mel to bring Rose in.

Rose was a femme beauty with long, painted nails and big hair. She moved gracefully into my office, and seemed a little shy. When I asked her what she thought of Mel saying that she was not a lesbian, Rose said, "She's not! And neither am I." Rose had always identified as heterosexual, and this sense of self had not changed since she fell in love with Mel. "I see Mel as a guy," she said. As I opened myself up to understand Rose and Mel's relationship from their perspective, I wondered for a moment if Rose was suffering from delusional internalized homophobia and colluding with her lover's confusion. Intuitively, though, I knew that Mel and Rose were not mentally ill. As I explored with Mel what it meant to be a "female-bodied guy," I had to be willing to reexamine previously held constructs of identity, including my feminist views of sexual and gender identity. Working with transgendered clients has meant entering a territory that has been largely uncharted; it has caused not merely a paradigm shift for me, but a paradigmatic upheaval.

In order to understand the meaning of transgendered behavior, I had to educate myself. While I knew that we live in a bipolar world of males and females, I had never looked closely at how many assumptions followed from that "truth." Western cultures have defined male and female into a world of opposites—either/or dualities. Feminism offered a powerful analysis of the limits of a gendered world, and called into question many of the assumptions about women that were holding us in a subordinate role, but feminism never challenged the concept of gender itself as an immutable construct.

At first, I hoped to find an easy way to encapsulate this third gender, but what I quickly found was that there aren't just three genders—there are a multitude of genders. Language has not caught up with lived experience, and so many people like Mel who are now termed "transgendered lesbian" might not identify with either the word lesbian or the word transgendered. Our language is inadequate. For instance, the term lesbian infers a woman-to-woman sexuality, but to someone like Mel, it can feel, subjectively, incorrect, although many people like her had previously identified as lesbians and are often partnered with women who still identify as lesbians. The term "transgendered" is also confusing because it is an umbrella term to describe people who do not identify with the gendered assumptions that are placed on their physiological bodies. While it has

become a political term to include all differently gendered people, sometimes it is used by the medical community to describe a “middle” position between transvestites (cross-dressers) and “true” transsexuals. “Transgendered lesbians” does not describe transgendered females who are not attracted to females, but might include male-to-female transgendered people who are. In my search for books and papers on this topic, I quickly found that the medical and clinical literature, as well as the popular media, focus more on male-to-female transgendered people, statistically assuring us that there are more of them. I suspect that there are many female-to-male transgendered people who have been living and passing as lesbians without perhaps having a more accurate name for themselves.

The deeper I went into the study of gender and transgender, the more interested I became, but it also challenged me. Like many lesbian feminists who came out in the '70s, masculinity was a synonym for patriarchy. But even while we were rejecting all things masculine to protest male power and domination, we were also taking pride in doing traditionally male tasks, like changing the oil in our cars and building our own cabins. We cut our hair short and adopted a watered-down masculine dress code of flannel shirts and jeans. We wanted to create an androgynous community because gender expression itself was suspected of being a tool of the patriarchy. I imagine now that this period of lesbian history made life easier for masculine lesbians, but in other ways it masked the real issues with which they were dealing.

The feminist movement has always had a discomfort with butch women and women who passed as male. Instead of upholding them as powerful role models, butch-femme couples were condemned for being a supposed parody of heterosexuality. Feminists, who had to account for their existence, explained that these women had few choices in a sexist, patriarchal culture.

Feminists had real discomfort particularly with butch—and stone butch—lesbians. They seemed to be rejecting womanhood, and we wondered if it was out of some internalized sexism. I don't think it occurred to early feminists that perhaps these butches did not see themselves as women, or as lesbians, and that they were not passing as men, but were men. Lesbian-feminist history may have mistakenly claimed some transgendered and transsexual females, and perhaps as the transgendered community reclaims its history, we will find that some of “them” are really some of “us,” and that some of “us” have always been some of “them.”

What is it like to go through life in a body that doesn't reflect, in a fundamental way, one's inner experience of self? My transgendered lesbian clients struggle with their feelings about their body image and some—but not all—choose to have body modification surgery, including breast reduction or chest reconstruction surgeries, and hormone therapies to change their sex characteristics. One client, Robin, a transgendered guy living in a female body, was opposed to any kind of surgery because it didn't fit his self view as a “natural-food kind of guy.” As a woman, Robin was only minimally interested in being with men, but in therapy Robin became aware of a growing attraction to men. Robin is now coming out as a gay male. As Robin's therapist, I stay curious and supportive of Robin's right to his own self-definition, but I also worry about the implications. What will being a gay man mean for Robin's future happiness? Can Robin survive as a gay man in a woman's body? Will Robin be accepted as a gay man without a

phallus, as a man with a female history? Without some medical intervention or hormone therapy, it is unlikely that Robin will be perceived as a male on the streets or at gay events.

Perhaps the most important thing we can do as therapists who work with trans people and their partners is to help them name their own journey, and not try to box them into our preordained categories. When Kim's butch partner began to identify as transgendered and appear more and more male, Kim, who had always identified as a femme lesbian, began to wonder what this meant about her. She told me, "I didn't live my whole life as a radical lesbian queer to wind up living in the suburbs with a husband and kids!" She was afraid of "becoming" heterosexual. Eventually, she was able to resolve her feelings by realizing that her identity was her own, apart from her partner's, and that she could maintain a lesbian identity even if her female lover appeared to be, and identified as, a man. Other partners in Kim's position have found a sense of belonging in the larger queer community: "I'm not a lesbian anymore, but I sure ain't straight, either!"

It would be great if therapists only had to be supportive and validating of gender differences, but the medical model has set us up to be the gatekeepers of hormone therapies and surgical interventions, since approval for them is contingent on the client expressing some level of Gender Identity Disorder. Gender differences outside the bipolar system have been seen as deviant and pathological; trans people are defined by their "dysphoria"—their unhappiness in their physical bodies. There was historically an element of homophobia to sexual reassignment surgery—it was only done if the post-surgical person would turn out to be a heterosexual. In other words, a gender dysphoric homosexual could become a "fixed" heterosexual.

Unfortunately, nowhere in our official clinical or medical models is there room for someone to alter their bodies if they are not dysphoric, or if they identify as bigendered. That model insists that one be male or female. I look forward to the day when, as trans activist Gary Bowen says, people are allowed to "park anywhere along the gender highway and stay there as long as they like."

I was more educated about transgender when I received a phone call from Lou's parents. The McKinley's had been separated since their only child, Lou, was an infant. Lou currently lived with her father, her stepmother and half-sister in a small town where her father owned his own garage. Lou often visited her mother, who worked as a beautician. I couldn't help but notice the gendered nature of these working-class parents. Dad had grease-stained hands, wore a flannel shirt, jeans and workbooks, and Mom had styled hair, heavy make-up and wore very high heels. They came to see me because they were worried about their daughter's behavior. She was in trouble in school, but they weren't sure what to think about it. Her father showed me reams of notes written on loose leaf paper by Lou to her best friend, Emma. The notes were mostly unremarkable high school letters involving gossip between friends. At one point, Lou mentioned a cousin, Bob, whom she said was visiting. The notes then continued in a different handwriting and were signed by Bob. He told Emma that he watched her at the schoolyard and that he liked her. The letters became progressively more sexual and detailed. Bob began to write about meeting Emma. Then the handwriting abruptly changed back to Lou's, and the note informed Emma that Bob had been tragically hurt in an automobile accident. Lou was allegedly writing the letters from his hospital room while he convalesced. The letters

were confiscated by a school counselor, who then inquired about Bob's condition. When she was told Lou did not have a cousin Bob, the counselor became alarmed at the intensity and drama of Lou's adolescent fantasy and contacted her parents. The counselor was concerned that Lou was manifesting symptoms of multiple personality disorder.

Those of us working with lesbian and gay youth probably wouldn't find Lou's homoerotic fantasy life so unusual. I first assumed that Lou didn't feel safe identifying her feelings directly to Emma, and, like many young lesbians, created a male persona. Lou's father looked at me and held my gaze. He said, "We don't care if she's gay, but she has to stop acting like this." I was impressed by how calm he took the news that Lou might be gay. When I met with Lou alone, she also looked at me and held my gaze, her face and posture very much like her father's, and said, "I'm not gay. I want a sex-change operation." As we explored what Lou felt about herself, it became clear that she didn't see herself as female and therefore didn't regard herself as a lesbian. Given the insidious nature of homophobia and heterosexism, I spent time assessing Lou's attitude as possible internalized homophobia. I came to believe that even though Lou had some discomfort about "gays," it wasn't homophobia motivating her to want to change her gender. Her parents were ready to accept her as a lesbian, and certainly being transgendered wasn't going to make her more socially acceptable than being a lesbian. Like Mel, she just "knew" she wasn't a lesbian.

I explored her family of origin and Lou willingly talked about her resistance to being "girly" like her half-sister. She was open about her attraction to girls, but said again that she always thought she was a guy, then admitted that she couldn't really imagine having a sex-change operation. She was intrigued and somewhat repelled by the thought. I worked with Lou's parents, giving them an opportunity to describe what they hoped and dreamed about for their child, and also to grieve for their fantasies of who they hoped Lou would become. They were wonderfully open to allowing Lou's sense of herself and identity to emerge on its own. Lou and I discussed what it meant to be a woman, and I introduced her to a more feminist understanding of the possibilities available to her as a woman. She read some lesbian novels, and visited the gay youth group. We spent time talking about her body image, and I encouraged her to dress up in anything she found attractive, no matter who the clothes had originally been intended for. Lou bought a man's suit jacket at a thrift store, which she wore with her faded jeans and button-down shirt. She was surprised to find that she was not only comfortable in these clothes, but that her peers in school liked the style. Then, surprising us all, Lou began dating a boy in school. She told me she felt like they could be "buddies" together.

I don't know whether Lou is a lesbian; I don't know whether she is a transsexual. I know she is a 16-year-old who is profoundly uncomfortable in a female body; I know she doesn't see herself as a girl or woman. I know she is sexually attracted to girls, but is now enjoying intimacy with a boy. I absolutely know that she does not have multiple personality disorder. I also know that she left my office this year with a greater sense of choice about how she will live her life than she ever would have had 10 years ago, because of my increasing comfort working with gender diversity. Transgendered lesbians are climbing out of the prison of invisibility and claiming their identity. As they develop a new narrative, I, for one, am listening intently.

