

Constructions of Gender

Readings:

Florence Dillon, 1999. "Tell Grandma I'm a Boy"

Dean Spade, 2006. "Mutilating Gender."

1. *Social construction*

Spade says that "[Billings and Urban] argue that transsexualism is socially constructed by medical practice." (317)

He characterizes his own view: "that sexual and gender self-determination and the expression of variant gender identities without punishment (and with celebration) should be the goals of any medical, legal, or political examination of or intervention into the gender expression of individuals and groups." (317)

Does Spade agree or disagree with the claim that "transsexualism is socially constructed"?

In further characterizing Billings' and Urban's view, he says, "They argue that transsexualism is constructed by and only exists through medical practice, which has invented it as a problem in the minds of patients. Instead, Billings and Urban suggest that "transsexualism is a relational process sustained in medical practice and marketed in public testimony."

2. *Foucault*

Foucault describes a notion of productive power that instructs a critical analysis of the regulatory effects of medical diagnosis and treatment. Foucault rejects what he terms "the repressive hypothesis" as a way of viewing the history of sexuality since the 16th century. He argues that the history of sexuality is not characterized by repression, but an "incitement to speak" about sex. He describes how the imperative has been to speak about sex, to accumulate detailed knowledge of it, to identify and classify it, and to seek out the origins of sexual behavior and desire. Sexuality has become the locus of the "true self" – to know the self is to know one's sex, sexuality, and desire. In this model, sex is figured not as the thing that must not be spoken, but as a public problem needing to be managed by an increasingly large group of medical, psychiatric, and criminal justice specialists.

Foucault demands that the project of asking whether approaches to sex are repressive or permissive be replaced by a project of examining how sex is put into discourse. His model of power as productive requires that power does not just say "no" and enslave free subjects, but rather produces knowledge, categories and identities that manage and regulate behavior. (317-8)

Disciplinary, productive power constitutes governance in the sense that it "structures the possible field of actions of others'." A central element of this governance is the production, dissemination, and utilization of knowledge. In this understanding of the workings of domination, law is replaced or supplemented by psychiatry, psychology and medicine, which create categories of dangerous individuals, subject positions that operate as regulatory instruments. (318)

3. *How does Spade differ in his account of trans desire from Billings and Urban?*

For Billings and Urban, the principle is that the treatment of distress in gender roles through surgery is fundamentally opposed to a liberating and politicized project of gender equality... However, because their mediating principle is that body alteration is always a privatizing and depoliticizing response to gender role distress, they paint transsexuals as brainwashed victims

who have failed to figure out that they are only undermining a revolution that seeks to save them. (318)

An approach that recognizes the possibility of a norm-resistant, politicized, and feminist desire for gender-related body alteration need not reject the critique of medical practice regarding trans sexuality nor embrace the normalizing regulations of the diagnostic and treatment processes. An alternate mediating principle for a critical analysis is possible. Such an analysis requires seeing the problem not as fundamentally lying in the project of gender change or body alteration, but in how the medical regime permits only the production of gender-normative altered bodies, and seeks to screen out alterations that are resistant to a dichotomized, naturalized view of gender. An alternative starting point for a critique of the invention and regulation of transsexualism is a desire for a deregulation of gender expression and the promotion of self-determination of gender and sexual expression, including the elimination of institutional incentives to perform normative gender and sexual identities and behaviors. This understanding suggests that the problem with the invention of transsexualism is the limits it places on body alteration, not its participation in the performance of body alteration. (319)

4. *Regulatory mechanisms*

- Who are the gatekeepers?
- What is the narrative of trans childhood?
- What are the criteria for being “really” trans?
- What other mechanisms?

How do these regulatory mechanisms reinforce dominant models of the gender binary?

How do trans individuals negotiate the regulatory mechanisms and how does their doing so challenge the claim by Billings and Urban that transsexuality “is constructed by and exists only through medical practice”?

Spade, Dean. “Mutilating Gender.” In *The Transgender Studies Reader*. Edited by Susan Stryker and Stephen Whittle. Routledge, 2006. © Routledge. All rights reserved. This content is excluded from our Creative Commons license. For more information, see <http://ocw.mit.edu/help/faq-fair-use/>.

MIT OpenCourseWare
<http://ocw.mit.edu>

WGS.301J / 17.007J / 24.237J / 17.006 Feminist Thought
Fall 2014

For information about citing these materials or our Terms of Use, visit: <http://ocw.mit.edu/terms>.