

**INTERVENING IN INTERSEXUALIZATION:
THE CLINIC AND THE COLONY**

Christina Annalena Eckert

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THE CLINIC AND THE COLONY**

INTERVENTIES IN INTERSEKSUALISATIE:
DE KLINIEK EN DE KOLONIE:
(met een samenvatting in het Nederlands)

Proefschrift

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CHRISTINA ANNALENA ECKERT

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Promotoren: Prof.dr. G. Wekker
Prof.dr. R. Buikema

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Introduction

In the summer of 2009 at the World Championship in Berlin, Germany, Caster Semenya, an eighteen-year-old from South Africa won the gold medal in the 800 meter sprint. In addition to the media which reacted surprised about the young woman who came “out of nowhere” and had made it to the gold medal in only six months, Semenya also attracted media attention because of her deep voice and a flat chest. It was suspected that she was not female - therefore male or half male, that is intersexualized - which would give her an illegitimate advantage over her female competitors. The discipline of 800 meters is a predominantly white domain in comparison to short and long distance races. The ensuing debate included statements about the racist and neocolonial aspects concerning Semenya’s treatment in the proceedings of the International Association of Athletics Federations (IAAF). The IAAF ordered a gender testing after she had been awarded the gold medal, which she considered not to accept. The gender test, also called the gender verification test, requires numerous kinds of medical evaluations. It includes reports from a gynecologist, endocrinologist, psychologist, an internal medicine specialist and an expert on gender.

This incident happened when I was already far along in my research for this dissertation; the incident, thus, testifies to the actuality of my project. But what is this incident really about? Professional sports are *the* evidence most often offered for *sex* being a natural fact: men run faster, throw further and are generally stronger than women. But why is the performed test called a gender verification test? What is it that has to be verified? Is it *sex* or *gender*? Why are these terms used interchangeably? The dimension of discrimination on the basis of sex is an integral part to international sports competitions. On both sides of the sex camps in the Olympics (and the “real world”) it is expected that men who are supposedly 100% men and women who are supposedly 100% women participate. The experts are now called upon to decide whether Caster Semenya is a man or a woman, or whether she has a “condition” called “intersexuality”. In this dissertation I will analyze the process of what I call intersexualization: the quest for a scientifically verifiable distinction between men and women.

In the part on *From Myth to Medicalization* in this introduction I trace the history of the above-mentioned quest as well as the construction of hermaphroditism or “intersexuality” in European discourse. I show, in line with Morgan Holmes, that “intersexuality” is “a perpetually shifting phantasm in the collective psyche of medicine and culture” (Holmes 2008: 155). In this brief historical account I demonstrate how Ancient Greek medicine developed explanations for the body; additionally I show how medical practitioners conceptualized what counts as normal for a body to emerge and to exist. In the Early Modern Period, which was dominated by Christian discourse and interpretation, the figure of the monster emerged as an explanation of everything the religious and legal order could not accommodate. With the beginning of the 18th century medical expertise started establishing itself and claimed the definitional sovereignty. This process would evolve through the long 19th century, claiming its toll with the development of a scientific gaze that started drawing clear anatomical boundaries between bodies. The new world order required securing since it was threatened by several developments, such as industrialization, imperialism and, last but not least, the first women’s movement. With the dawn of sexology the homosexual and the hermaphrodite moved to the center of attention. The first sexologists’ intense occupation with evolutionism guaranteed that the “invert” could be assigned a place of the deviant in the new order of the normal and the abnormal. Freud came in and aligned the psyche with the body; complete identities could from now on be deemed aberrant with regard to the requirement of civilization. With the emergence of endocrinology the term “intersexuality” was coined. It was in this discipline where fluids were again of heightened medical interest, just as it was the case in Ancient Greek medicine. Since the 1950s the condition of “intersexuality” emerged as a phantasm in medical discourse, albeit only to be normalized according to the standard notions of femaleness/femininity and maleness/masculinity.¹

In contemporary medical discourse Semenya’s body cannot legitimately be intersex or hermaphroditic; it only can have a Disorder of Sexual Development (DSD).² The term “intersexuality” has slowly replaced the term hermaphroditism since the 1950s. The term “intersexuality” has been replaced by the diagnosis of DSD in 2006 and has since been used predominantly by the medical establishment.³ In

¹ I use the conjoined terms here to denote that even though the “ness” is separated from the “inity” they are always thought of as being only “normal” if they appear together.

² The newer term Disorders of Sexual Development (DSD) will be explained below to a greater extent. DSD as an umbrella term for “intersex conditions” was introduced in 2005 and has since caused a great deal of discussion between activists, scholars and physicians (see Feder and Karkazis 2008; Holmes 2008; Spurgas 2009)

³ In October 2005 the term intersex was replaced by the term Disorders of Sexual Development at a conference in Chicago hosted by the Lawson Wilkins Paediatric Endocrine Society (LWPES) and the European Society for Paediatric Endocrinology (ESPE). Fifty international medical experts in the field reviewed “intersex management” and data on longer-term outcomes in order to formulate proposals for future studies. The published “Consensus Statement” argues that “the term Disorders of Sex Development (DSD) is proposed, as defined by congenital conditions in which development of chromosomal, gonadal or anatomical sex is atypical” (Hughes et al. 2006). Therefore, the emphasis is on development and abnormality.

this dissertation the term intersexualization rather than “intersexuality”⁴ or DSD will be used. I develop an understanding of specific moments in the processes of intersexualization and will not make any statement about what “intersexuality” or DSD is. The term Disorders of Sexual Development is also a revival of late 19th century sexology discourses which interconnect with the emerging discipline of anthropology. I interrogate the underlying evolutionary discourses which ground the othering process fundamental to cross-cultural intersexualization. As I demonstrate in this dissertation, intersexualization combines various narrative tropes of evolutionary, biological, medical and psychological knowledge, which are intertwined with racializing/ethnicizing discourses. Therefore, I will not look at what “intersexuality” is but what the grounds and means were for initiating, manifesting, and re-articulating the processes of intersexualization time and time again during the last few decades. I attempt a historicization of the epistemic logic and discursive operations within and through which intersexualizations have been cross-culturally produced in psycho-medical and anthropological discourses.

The gender verification test Semenya had to undergo was ultimately performed to determine her biological sex. Even though there was a “gender expert” on the team who will have heard Semenya stating that she feels that she is woman, the biological tests are regarded as delivering the crucial results. Semenya had to undergo chromosomal, endocrinological, anatomical and gonadal examinations; the results of each are interpreted alongside the normative categories of what is determined as male and what as female. Eventually, the general secretary of the IAAF stated that Semenya is a woman but maybe not a 100%; *The Times* published confidential test results provided by anonymous sources. Her biological make-up is said to be neither completely male nor female, even though she feels to be a woman. Had she not participated in professional sports and undergone these tests as most people do not, maybe she would never have had her sex/gender questioned – as most people do not. Semenya only became intersexualized through the process of being tested and being assigned a sex as either or both male and/or female despite of the evidence that either category cannot be her sex but only her gender - that is a feminine or masculine gender role and identity. In this debate, the fact that she wants to be a woman and has formerly not questioned to be a woman is silenced. What counts is the experts’ meaning, even though one could assume that Semenya is the only expert to know who she is and wants to be.

In the first section of this dissertation I will look into the phenomenon of the expert in intersexualization. I demonstrate that since the 1950s researchers started intersexualizing certain bodies through inventing a distinction between sex and gender. It was in psychological research at the Johns Hopkins University in Baltimore, USA, that the gender-concept was invented. As I will show, experts construed “intersexuality” as a psychopathology in need of treatment during infancy, even though their samples demonstrated that, just as in the case of Semenya, there was no problem before the researchers intervened. Since psychologist John Money was the crucial figure in this process I will interrogate the series he published together with John and Joan Hampson at the Johns Hopkins Hospital between 1955 and 1975. Of special interest is herein the design of a treatment recommendation that included surgery in infants. The treatment paradigm that originated from these publications exemplifies the workings of intersexualization with regards to the production of certain bodies. Current debates between intersexualized people address the fact that there are no or very few personal accounts on the issue by anybody who has not had surgery (Dreger 1999). Therefore, one could also argue that “intersexuality” is actually an identity or rather an identification that is based on the experience of medical treatment in the West. This is to say that “intersexuality” is a medical category; it only becomes an identity by the production of an embodiment through surgical intervention. The experience of medicalization and pathologization is not just central in the lives of intersexualized people; it is also responsible for possible self-identification as “intersex” or as hermaphrodite⁵, as well as for the subsequent resistance or critical stance towards the medical establishment (e.g. Kessler 1998; Alexander 1999; Dreger 1999; Karkazis 2008). Complex and detailed medical and psychological/psychoanalytical accounts and categorizations of the different “intersex conditions” are a precondition for an “intersex” diagnosis to be made. In contexts where medicalization and pathologization are absent, intersexualization cannot take place; hence, intersexualized people could not be identified as such.⁶

⁴ I will, however, use the term intersexuality in inverted commas whenever the context requires. It is also used in inverted commas to indicate the construction of a specific category. In some cases I use intersex in combination with “movement” or other terms, in which cases I do not use inverted commas since these are expressions which have been used in relation to political strategies and/ or have been adopted by intersexualized people themselves. I thereby subject myself to the critique Jacques Derrida has aired towards the use of inverted commas: he called them “speech act condoms” i.e. quotations that are not actually quotations (Derrida 1995: 437, n. 9).

⁵ Especially in Germany intersex movements started reclaiming the term hermaphrodite or “Zwitter.”

⁶ Critical feminist Anne Fausto-Sterling gives a list of “common intersex” types in 2000. I will list these here but ask the reader to keep in mind that this is a list that reflects the “diagnosticism” – the compulsion to diagnose – by the medical establishment (Eckert 2009). The definitions of these conditions vary according to the parameters and the knowledge production in the medical field. Fausto-Sterling lists six so-called conditions: Androgen insensitivity syndrome (AIS), Congenital Adrenal Hyperplasia (CAH), Gonadal Dysgenesis Hypospadias, and Turner Syndrome. Klinefelter Syndrome (Fausto-Sterling 2000). Fausto-Sterling, for example, does not list so-called 5-alpha reductase deficiency, which I will interrogate as a diagnosis in section 2. Zeiler and Wikström state that

As I will demonstrate, experts first determine the true sex to then assign the best sex in their treatment recommendations. This quest for a true or best sex reflects the question that Foucault posed in the introduction to the journals of Herculine Barbin, a 19th century hermaphrodite in 1980. When he edited the journals he came to the following question: “do we really need a true sex?” (Foucault 1980b). Since then, a number of people have not just drawn on this question but interrogated intersexualization from various angles. In 1990 Judith Butler refers to Foucault’s account in her groundbreaking study *Gender Trouble* and interrogates the relationship between sex and gender also with regard to intersexualization. In the same year, Suzanne Kessler, sociologist and psychologist, conducted interviews with medical experts in the field of pediatric intersexuality and revealed their reliance on John Money’s treatment recommendations from 1955 that guide them in determining a child’s sex and in applying Money’s treatment paradigms. This article was the foundation for *Lessons from the Intersexed* in which Kessler gives further evidence of the misogynist, heterosexist and phallogocentric paradigms that shape “intersex management” (Kessler 1990, 1998).

In the first section on *The Clinic* I build upon this work and interrogate the rationales of making the practice of intersex genital surgery seem necessary. I demonstrate in Chapter 1 on *Pathologization and Surgery* that it is the concept of gender role as distinct from sex that was initially employed by Money to argue for a surgical modification of genitals to align the body of an individual with a masculine or feminine gender role. In intersexualization, as I will show, gendered stereotypes are employed in order to essentialize the binary organization of the sexes and the genders. Moreover, in referencing Freud’s concept of innate bisexuality, Money et al. practice a selective reading which allows them to conceptualize psycho-sexual development as based on sexual dimorphism. The normalizing surgeries that are common in intersexualization go much further than applying make-up, as in the case of Semenya (as I will show below) in order to align bodies to the system of two sexes. In my account I focus on the practice of clitorrectomy and the discursive preconditions which helped to standardize this practice in the medical establishment. Intersex genital surgeries are still performed and rely on the theories that Money et al. have developed. Even though intersex activists have formed movements to defeat this practice, physicians predominantly continue cutting healthy flesh for the sake of an esthetico-functional outcome.

In Chapter 2 on *Essentializing Gender Identity*, I interrogate the works by Robert Stoller, psychoanalyst, who build upon Money’s work but modified the gender-concept slightly. Stoller, in his research in which he also examined transsexuality, focuses on the hypothesis of a biological force. In his account, dimorphic sex evolves as the precondition for a binary organized gender identity; gender identity becomes essentialized by a postulated biological force which, supposedly, naturally produces masculine and feminine identities. He developed the principle that one *is* a sex and *has* a gender identity. But it is not just the distinction of the two: it is the continuous reallocation/modification of the relationship between the two mutually distinct categories of sex and gender that prevails and is constantly rearticulated in intersexualization. I suggest that Stoller also uses a selective reading of Freudian psychoanalysis to back up his theories of a core gender identity. In the course of this second chapter I demonstrate how Stoller develops the concept of a hermaphroditic gender identity on the basis of a hermaphroditic body, thereby implying that specific bodies produce specific identities. With this move Stoller relies upon the figure of the third yet also revives it for psycho-sexual theories.

I suggest that the gender-concept, implying a sex and gender, is fundamental for the normalization and pathologization process we find in intersexualization. This means that some bodies are called “non-normal” and in intersexualization are made to fit the norms of binary identities. I propose that it was in the processes of intersexualization where the sex/gender distinction was invented. These processes have their origins in a selective reading of psychoanalytical theories that focuses on the biological aspects. They find their material expression in the (surgical) modification of bodies and their accompanying psyches – crucial signifiers of identity in Western discourse.

The reason why Semenya had to be tested was to verify whether she claimed legitimately, according to the determinants of sex, to be a woman and to participate as a woman. Participation in the Olympics as a woman means participation in the world as a woman and vice versa. The social order assigns places for men and women but not for intersexualized people. Therefore, it is social, political and bio-medical imperatives which are alternately instrumentalized to contest intersexualized people and, therefore, the congruence between sex and gender. The Olympics are the emblematic institution of the gender-divide based on sex, as this case proved again. The competition is clearly divided into two separate fields, one in which men compete against each other and one in which women compete against each other. Despite the huge variety between men on the one hand, and women on the other regarding size, weight, strength, muscle density and so on, this division is upheld and regarded as fair. The social category of gender,

“the incidence of so-called intersex conditions varies from 1.7 to 4% of all children (...). Even if the lower figure above is used, this means that more children are born sexually ambiguous than with Down’s syndrome (1 in 800–1000) in Europe and the USA” (Zeiler and Wikström 2009: 359).

however, remains an empty signifier if sex is not verified, as the misnamed gender verification test proves. Gender, since the coinage of the term in the 1950s, is never enough; sex is always implied.

Since the development of the gender-concept in intersexualization feminists have eagerly taken it on in critical thinking to challenge sexism. However, I argue in the third chapter on *Feminist Biology and the Five Sexes*, that the gender-concept is problematic because it always implies sex as the natural biological foundation of bodies and identities (as Judith Butler has already argued in 1990). I will touch upon the problems which come with the application of the gender-concept in feminist research but will also show its merits, especially in critical feminist biology. The body has been historicized by feminists and, as such, biological essentialism could be defeated at least to a great extent, if not completely.

One of the most influential volumes of critical feminist biology is *Sexing the Body* (2000) by Anne Fausto-Sterling. Here, a similar case to Semenya's from the 1988 Olympics is reported. Maria Patiño had been tested by the International Olympic Committee (IOC) in order to determine whether she was properly assigned to the women's division. Patiño, the chromosomal test determined, had a Y chromosome and was then diagnosed with Androgen Insensitivity syndrome (AIS), which is considered an intersex condition. She was banned from the Olympics and only later rejoined after being reinstated by the International Amateur Athletic Federation (IAAF). Patiño went down in the annals of professional international sports competitions as "the first woman ever to challenge sex testing for female athletes" (Fausto-Sterling 2000: 2). Gender testing used to be mandatory for female athletes at the Olympics, but the screenings were dropped in 1999 because the IAAF realized that it was a sexist practice. In 2006 at the Olympic in Athens six athletes with XY chromosomes (AIS) were allowed to participate in the female department.

Fausto-Sterling, in this volume, powerfully demonstrates that "only our beliefs about gender – not science – can define our sex" (ibid.: 3). However, with my analysis of Fausto-Sterling's approaches to "intersexuality" I will show that the dimorphism of sex is still called upon even when the initial attempt is to challenge it. Fausto-Sterling initially provocatively advocated "Five Sexes" intending the deconstruction of bio-medical categorizations of sex and gender. By putting it in the context of critical feminist approaches to biological determinism, I will review her proposal and map out the critical potential and the problematic side of her biological approach to intersexualization. I suggest that Fausto-Sterling, by drawing upon the notion of the continuum of the sexes - just as Stoller and Money - reiterates the two supposedly normal and heterorelational poles of maleness/masculinity and femaleness/femininity.

All the theories that I interrogate in this first section on *The Clinic* have been developed through a perception of hermaphroditism/"intersexuality" as a "phenomenon". In this dissertation, however, I intend to demonstrate that it is rather this *perception* that is the phenomenon. "Intersexuality" and intersexualization are differently articulated and constructed according to discipline, method and intention.

In recent years a number of critical approaches to intersexualization have been published, mainly from feminist and queer perspectives. Alice Dreger provides a historical perspective and a compilation of work on the ethical side on intersexualization (Dreger 1998, 1999). Other historians researched intersexualization in the Early Modern Period (Daston 1991; Daston and Park 1995) and in the 17th, 18th and 19th centuries (e.g. Klöppel 2008; Krämer 2007). Since then, numerous critical accounts have been published, approaching the subject from different angles such as legal (e.g. Ford 2001; Bird 2005; Grabham 2007; Kolbe 2009), sociological (e.g. Preves 2003), healthcare and medicine critical (e.g. Roen 2004; Sullivan 2008), anthropological (e.g. Karkazis 2008), psychoanalytical (Hird 2003b), and ethical perspectives (e.g. Sytsma 2006; Hester 2004). Iain Morland poses theoretical questions about what feminist or queer theory can do for critical research into intersexuality (2001, 2007) or "Is Intersexuality real?" (2001) and explores how the intersex controversy from the last two decades can be read (2009). Morgan Holmes' various publications range from a queer perspective on intersex surgeries (2000, 2002), a critical investigation of ethnographic accounts (2004), a human rights perspective (2005) to a monograph on *Intersex: A Perilous Difference* (2008) and the edited collection *Critical Intersex* (2009a).

My dissertation builds upon this body of work in the last two decades, yet, in the section on *The Colony*, adds a new dimension to the critical body of work on intersexualization. In this section I interrogate the theoretical space of the Colony, in which, as I argue, the process of cross-cultural intersexualization takes place. In the introduction to *Critical Intersex*, the most recent volume on critical intersex studies, Morgan Holmes states that

Intersex is not one but many sites of contested being, temporally sutured to biomedical, political and social imperatives in play in each moment. 'Intersex' then, is hailed by specific and competing interests, and is a sign constantly under erasures, whose significance always carries the trace of an agenda from somewhere *else*. (Holmes 2009b: 2)

I argue that in the case of Caster Semenya the agenda to intersexualize comes from somewhere *else*. In her case it is literally from somewhere *else*, since all the tests she has to undergo are not conducted in her homeland South Africa. These tests take place in Western countries by the IAAF, which hosted the Track

and Field Olympics in Germany to which Semenya traveled to compete as a woman. Whatever Semenya's body will reveal to the testers, it will be interpreted in the contemporary Western framework of binary sex determination. In this framework "intersexuality" is the field which is first determined discursively through the process of othering to then be erased literally through surgery. I argue, however, in discourse, that Semenya's intersexualized body has emerged through its production as other-than-the-binary-sexed-body and as other-than-the-Western-body.

In the history of professional sports a number of incidents like this one have happened. Then, why is Semenya's case so controversial? Her South African descent and the fact that all these tests are conducted by Euro-American institutions interlink the dimensions of sexism and racism in a neo-colonial geo-political setting. If Semenya had not excelled as much as she did and if the 800 meters were not a white domain would someone have cared? Again: what is the test to verify? Why has Semenya's case triggered such a debate and media attention? Does Semenya's case have a racial dimension? Who are in fact the people who question Semenya's sex and who claims the power to define if she is a woman or not?⁷

The case of Semenya, in many respects, recalls the story of Saartje Baartman, a Khoikhoi woman who was removed from South Africa by a British army surgeon and his servant to become "exploited as a spectacle" in Europe because of her excessive sexuality represented by her "Hotentott apron" and her "protruding behind" (Buikema 2009). The publications on the physical examinations of her body, her genitals in particular, tried to prove that Baartman's body represented "an essentially different type of the human species" (Buikema 2009: 75). The analogy of her body parts to that of animals were to represent her inferiority to the white civilized Europeans to whom she was exhibited and who also examined, dissected and exploited her. Moreover, the subjection and appropriation of Baartman's body can be read analogously to the colonization of the land she came from. In the imperialist and colonial times of the 18th century, Baartman's anatomy came to stand for primitiveness and lust, signified through her body and her African origin. I suggest that Semenya's case from the 21st century is related to Baartman's case. Semenya's "intersexuality" has equally been exploited as a spectacle. Semenya did not willingly cheat, yet, her case has been treated just as a doping case; it has been made public and the gossip ridicules anything that should have been called a medical matter requiring patient confidentiality. When entering the search phrase "Caster Semenya" in Google, eight million hits return; thus, it seems that everybody has a say in who Semenya "really" is. Baartman was a curiosity; Semenya is the subject of normalizing processes (for example through the make-over by a glossy magazine, see below). Both are looked upon by a Western gaze, which claims the power to determine, name, label and assign a place in the orders of the racialized Western sex-gender-sexuality-system. In both cases it is the scientific institutions of the West which have the power to dissect, display, diagnose and exhibit. The spectacle that Baartman was subjected to seems to have been repeated. The freak show continues.

In chapter 4 on *Clinicalizing the Other* I will interrogate the event of such a spectacle in clinical anthropological research in 1985. Gilbert Herdt, anthropologist, and Robert Stoller, psychoanalyst, conducted an interview with a Papua New Guinean Shaman. Yet, not his shamanism but rather his presumed hermaphroditism/"intersexuality"⁸ was of interest to them. In the course of the chapter I position Herdt and Stoller in their respective disciplines, their relationship to each other and their relationship to the Shaman Sakulambei. In their collaboration Herdt and Stoller, reflecting the atmosphere in anthropology at the time, were interested in sexuality in the other culture and designed the method of clinical ethnography to be able to match their interest. They claim that diagnosis is not intended in their clinical ethnography, yet they diagnose Sakulambei as being a hermaphrodite. I argue that in their account the spectacle is repeated. The sexuality and the body of the other is exposed, discussed and exploited. The Western gaze of the anthropologist in the other culture exemplifies the workings of the Western discourse of pathologization in the coordinates of the Western heterorelational sex-gender-sexuality-system.⁹

Semenya appeared on a cover of a magazine with a complete feminine make-over shortly after the media hype about her suspected maleness began. This cover photograph represents all markers of femininity in the Euro-American world. Make-up, eyeliner, long, painted fingernails, a dress and jewelry are combined with a feminine posture. The title screams: "Wow, look at Caster now!"¹⁰ Everybody is supposed to be convinced that Semenya is a woman after seeing this picture; moreover, this photograph is intended to defeat the rumors that Semenya might be a man or at least that she is too masculine. This is a crucial difference between the representation of Semenya and Baartman. Baartman was represented as

⁷ Leonard Chuene, the head of South African athletics, told The Associated Press in a telephone interview that "if it was a white child, she would be sitting somewhere with a psychologist, but this is an African child" and he added: "who are white people to question the makeup of an African girl?" (This quote was also chosen as title for an article by *The Observer*, UK on 23.08.2009).

⁸ I use the term hermaphroditism or hermaphrodite whenever it is used in the body of research that I am analyzing. I do not want to indicate that it is not a medical category that is constructed; however for better readability I will not put it in inverted commas.

⁹ It is important to note here that in this dissertation I use the term of "heterorelational sex-gender-sexuality- system" to indicate that the categories of sex, gender and sexuality are intrinsically connected in the gender-concept. Sometimes, however I will replace it by the term "heterorelational system" for better readability.

¹⁰ "Wow, look at Caster now!" is the headline on South African glossy magazine YOU, Number 114, 10.09.2009.

excessively female, animal-like and primitive, and other. Semenya is represented as excessively masculine and monstrous in her lack of femininity. She was simply too fast. Both cases, however, demonstrate through their representations (which are diametrically opposed) the sexualization of racialized “inferiority” and the racialization of sexual “aberrance” and “degeneracy” (Malatino 2009). Anatomical features are explained in the framework of normalcy and deviancy combining discourses of racialized and sexualized otherness. The trope of sexual excess is in both cases projected onto the (neo-)colonial body of the other which is used to consolidate the “normality” of the Western binary and heterorelational system.

In chapter 5 on *Colonizing the Other* I interrogate a similar process in clinical anthropological research in which the trope of sexual excess is conceptualized through the framework of bio-medical knowledge production in the other culture. I follow up on Stoller’s and Herdt’s research even though this time they work with other collaborators. Stoller works with the physician Julianne Imperato-McGinley in the Dominican Republic (1979) and Herdt with the endocrinologist Julian Davidson in Papua New Guinea (1988). In the Dominican Republic case Stoller seeks to solidify his claim of the biological force with the help of the medical research team. By collecting blood and urine samples they diagnose male pseudo-hermaphroditism. This is by no means all; they are interested in the influence of hormones on the development of gender identity, a concept that Stoller developed. The report is a description of the behavior, clothing and sexual activity of the participants of the study. I suggest that their portrayal tends towards a consolidation of masculinity since it is testosterone that they want to see responsible for the gender identity in the so-called male pseudo-hermaphrodite. Herdt and Davidson follow their example and conduct a similar bio-medical research on the Sambia in Papua New Guinea. Just as in the Dominican Republic case they equally construct their sample of people in the other culture as a “natural experiment” in a “naïve” population. Their representation equally tends towards masculinity, confirming the bio-medical diagnosis and pathologizing those as effeminate who do not conform to their diagnosis. However, Herdt challenges the Dominican Republic case and argues that there is a three-sex code present as opposed to a two-sex-system in the West. In his future research up until 1994 he will create a third sex and a third gender for the Sambian culture. Herdt in his career has contributed extensively to the acceptance of homosexuality in the USA, however, the move to use another culture to argue for a less restrictive (or less homophobic) attitude in the own and known¹¹ culture is problematic. In these cases another dimension of colonization is identifiable; both studies have colonized the other cultures with their representation in the framework of the Western heterorelational system. The imposition of the Western notion of identity and the silencing of their symbolic organization testifies to the (neo-)colonial aspects of medical anthropology. The designation of the other culture as exemplifying a three-sex code and, therefore, hosting a third gender that is the extension of a third sex is the application of the gender-concept and denotes a constructive essentialism (Dietze 2006b). In this framework every body can have and express a gender but only the one to which their sex, diagnosed by fragmenting Western bio-medicine, determines them.

Herdt’s work, the thread through my second section, is epitomized in his edited collection *Third Sex Third Gender*, the theme of which will partly be discussed in the Excursus on *Bound to the Third?* Here I do not focus on Herdt’s work particularly but on the application of the term *berdache*, which in anthropology stands in for the history of the construction of the Third in the other culture. In this account I will also elaborate on the difference between *etic* and *emic* research by showing how the Two-Spirit movement has challenged the colonization of their symbolic system by Western discourse. I will also briefly touch upon Homi Bhabha’s concept of the third space and Marjorie Garber’s use of the third as a disruption of the essentialist notions fostered by particular constructions of the Third in anthropology.

The discussions of the cases of Semenya and Baartman are characterized by the opposite construction of sexuality in the other: excessive masculinity and femininity respectively. Yet, their representations work in a similar fashion. The objectification of both women reduces them to their sexuality and to their race. The cultural archive that draws upon these specific sets of sexualized and racialized representations, deriving from the imperialist and colonial history, proves to be alive and kicking. Baartman was othered in a time in which colonial endeavors and violence required justification through the inferiority and animality of the colonized. In the globalized and neo-colonial age, Semenya is othered through intersexualization, which is associated with developmental issues (DSD) and ambiguity of sex/gender. This happens at a time when the sexed/gendered basis of Western civilization and consumption, the division of production and reproduction threaten to dissolve and cause anxiety. Representations of non-Western sexuality in both cases serve to affirm and reinstall the achievements of Western civilization and its sex/gender ideologies according to the justifications needed in a particular time.

¹¹ I would like to note that the own culture is always also the known culture. Anthropologists travel from their *own* cultures to other cultures and perceive and construct them as other because they are different to their *own* cultures. I want to stress that anthropological researchers also inhabit a specific epistemological space from which they travel to the other culture. This epistemological space is *known* by them and their interpretations and representations of the epistemology of the other are always interpreted through this framework of the *known*.

In chapter 6 on *The Fifth Other* I interrogate the discourses of anthropology, psychoanalysis and sexuality in a (neo)-colonial time. Again it is Herdt's work which is of central interest. This time it is his endeavor to find the reason of why the Sambia can host the *kwolu-aatmwol* (the Sambian hermaphrodite) and, therefore, in Herdt's term a third gender. He argues that they are simply polymorphous perverse. Using this particular Freudian psychoanalytical terminology evokes a number of tropes, as I argue. Mainly notions of immaturity and childlikeness are implicit in the use of this concept. Moreover, as I show, the Freudian concept cannot be thought of without the discursive underpinnings, primarily those of evolutionism and sexology. Evolutionary theory, dominant at the turn of the century, reflects the anxieties about racial and sexual boarders at the time. In my analysis, this evolutionary framework is important. In the 19th century hermaphroditism/"intersexuality" has been conceptualized as a sexual degree via an analogy to racial degrees. This happened in order to assign it an intelligible place in the orders of nature. The orders of nature at this time were colonial, patriarchal and heteronormative, which is not to say that this is not the case anymore, quite the contrary; in the revived notion of the fifth other, the sexual savage in cross-cultural intersexualization, these orders are reinstalled. The civilized and sophisticated West can rest and look upon the other and their other sexuality, namely that of arrested development or DSD. Nothing is threatened; only the bodies of intersexualized people are continually mutilated to fit the norms of the Western sex-gender-sexuality-system.

The critical approaches by feminist and queer theory during the last few decades deserve credit for powerful interventions in the production of heteronormativity and the supposedly natural dimorphic sex(ual) differences as well as the "deviances" or "disorders" which are produced to reaffirm the norm. They reveal the unnaturalness and arbitrariness of heterosexual normalcy and have disrupted the powerful links between bodies, identities and sexuality. This dissertation is an attempt to show the workings of the "operation theater" (Preciado 2003) that subjects "every-body" to the binary heterorelational workings of Western societies. In the processes of cross-cultural intersexualization, however, the norms of heterosexual maleness/masculinity and femaleness/femininity are reinstalled via the construction of an Other. In this dissertation, I argue that it is not the fact of male and female that produces a third – the intersexualized body – but that it is the very processes of intersexualization that produces white hegemonic heteronormative maleness/masculinity and femaleness/femininity as natural and normal.

Intersexualization, I suggest, is at the core of the process of the construction of a dichotomously sex(ual)ed/gendered¹² society. The category of "intersexuality" is repeatedly used to re-articulate and argue for a distinction between male and female and masculinity and femininity, as well as for a distinction between homo- and heterosexuality. The harm produced by the inauguration of this category in medical discourse and practice is atrocious; in fact, it recently emerged as a human rights discourse.¹³ Intersex activists speak out and resist the patronizing epistemological imperialism and mutilating violence of the medical establishment. The recent colonization of the bodies of those who are intersexualized by dismissing intersex as an identity, which could and has actually claimed recognition outside of the medical establishment, was achieved by replacing "intersexuality" with DSD. Intersex activists however, continue reclaiming their history and challenge the discourse of "intersexuality" being a phenomenon. The processes of intersexualization are the phenomenon. In this dissertation I want to contribute to the interrogation of how this phenomenon works. In the following subsection of this introduction I trace historical narratives, which have led to the medicalization of hermaphroditism/"intersexuality" before the 1950s.

From Myth to Medicalization

At the beginning of the 21st century, intersex activist Kiira Tria uses the email signature "don't quote Ovid to me" in her correspondence. In the *Metamorphoses* Ovid (43 BC- 17(18) AD) told the mythology of Hermaphroditus: the son of the gods Hermes and Aphrodite. While Hermaphroditus bathed in a fountain, the nymph Salmacis fell in love with him and consequently wished to be united with him. The gods heard

¹² I will use the term sex(ual)ed/gendered in order to firstly indicate what I have mentioned above about the masculine/male and female/feminine distinction (see footnote 1); it is to indicate the processes of intersexualization which have brought about the distinction between sex and gender. Secondly, the brackets around the "(ualiz)" in "sexed" are meant to indicate that the sexed body as the biological body is not to be separated from its sexualization, meaning the penetration by the heteronormative matrix which requires each and every body to have a sexual orientation. This is to say that the body is, according to the "direction" of its desires, located along the coordinates of homo- and heterosexuality but also on the coordinates of normality/abnormality and male/masculine and female/feminine (Hark 1993). The processes of pathologization and normalization are intrinsic in this process and are based on the supposed naturalness of heterosexuality/reproduction.

¹³ To my knowledge, the exhibition *1-0-1 [one 'o one] intersex* at NGBK in Berlin Germany in 2005 was the first to title: "*Das Zwei-Geschlechter-System als Menschenrechtsverletzung*" (The binary sex/gender system as a human right violation) (my translation)) (exhibition catalogue: NGBK 2005). In 2005/6 *Cardozo. Journal of Law and Gender* published a special issue on intersexuality and human rights discourses (e.g. Benson 2005; Bird 2005; Gruber 2005; Holmes 2005)

her desire and fulfilled it by joining the two together for ever. Hermaphroditus from then on lived with Salmacis as a part of him. Some interpretations of this myth even state that Hermaphroditus was only “half a man” from that point onwards (Brisson 2002). This story is interesting in many respects for this dissertation. It is a highly violent narrative, which depicts the colonization, or invasion, of one body by another, of one entity by another. It also implies that two initially separate entities are now joined in a new hybrid form. The myth depicts a specific engagement with the human body and its place in the mythological order of things. In the history of intersexualization in the West, the human body has taken on different places in the socio-political sphere before entering the sphere of the medical. What Tria might mean with her email signature is that, as a contemporary intersex activist, she is tired of hearing that the problems she faces in this society have existed for several thousand years. Additionally, she may feel repulsed by the implication of a coherent narrative that assigns to her a specific, limited and inherited, determined place in society. Moreover, a supposed mythical and ancient component provides an explanation for the atrocities to which intersexualized people were subjected to at the beginning of the 21st century. This storytelling of the supposed origin of hermaphroditism/“intersexuality” is therefore dismissed by Tria as a frame of reference: it cannot provide us with any valuable information on intersexualization since it is and remains a myth. In fact, it consolidates the notion of “intersexuality” as a mythical “phenomenon”. Thea Hillman states that “while the myth of Hermaphroditus has captured the imagination for ages, it traps real human beings in the painfully small confines of story. Someone else’s story” (Hillmann 2008: 2). To reveal the production of intersex(ualiz)ed bodies by showing the shifts that have taken place, is to counter a unified and coherent narrative of the subject. The phantasm, not the myth, has to be historicized, opened up and made approachable to different interpretations.

The traceable process of medicalization is important here. Medicalization is the process through which something is made into a medical problem, to be treated, analyzed, diagnosed and solved by so-called experts. Of course, the process becomes more powerful the more so-called experts problematize the issue and show epistemological interest. The following section explores the (self-)creation and emergence of so-called expertise in history and the creation of hermaphroditism/“intersexuality” as a problem. I examine historical accounts (mainly secondary literature) ranging from ancient Greek mythology to stories from the 19th century while focusing on historical accounts that are concerned with hermaphroditism/“intersexuality” and their explanations, be they divine or medical. These accounts are organized chronologically and focus on major works ranging from Aristotle to Hirschfeld and Freud. I am especially interested in how these works have been translated, interpreted and made intelligible. In order to understand this I trace major shifts in the conceptualization of hermaphroditism/“intersexuality” and locate them in their specific time frames.

Western traditions of knowledge productions are conveyed by written accounts, traditionally institutionalizing specific authoritative approaches. Western medical accounts have an established history which features a number of authors whose works have been passed on through the centuries and who have coined the modes of knowledge production. The body as an object of knowledge has experienced major shifts in its conceptualization as healthy, sick, male, female, normal, abnormal; additionally, the body has been subjected to a variety of frameworks through which it has been interpreted and represented. The ability of bodies to reproduce has fascinated researchers and writers in the West¹⁴ for centuries: their attempts to explain and represent their findings are presented to the audience of later centuries. In the following section, I depict this authoritative train of handed down accounts on the body relating to the processes of intersexualization.

Hippocrates of Kos (ca. 460-375 BC), a famous physician during antiquity, assumed that sex/gender existed along a continuum from the extreme male to the extreme female with hermaphrodites located in between these two states. Of particular importance to the Hippocratic view of hermaphroditism was the idea of “being in between the sexes”. Hermaphrodites were therefore regarded as intermediate: neither male nor female. Hippocrates regarded the sex/gender of the fetus as determined by two opposites: the maternal and the paternal principles, which generated different seeds. The fetus would inhabit a position on a spectrum depending on its own position in the womb and the dominance of the seed. This spectrum ranged from the unambiguously female to the unambiguously male, which were both located on different sides of the uterus. Female offspring were situated on the left side and males on the right side. In addition, both were considered to be produced by either female or male seeds, donated by both parents. Every other combination was thought to produce an intermediate sexual nature on the spectrum, either effeminate and fragile males or strong and masculine females. In the event of balanced male and female components, the fetus was located truly in the middle of the uterus and therefore hermaphroditic (see e.g. Krämer 2007; Schleiner 2000). The physician Claudius Galen von Pergamon (131-201 AD) revived the Hippocratic models and modified them slightly to accommodate the one-sex model which explained the

¹⁴ I do not want to indicate that it is only the West in which researchers pursued this interest. However, in this dissertation my focus is on the epistemological space of the West and does not claim to make any statement about knowledge production outside this particular epistemological space.

sexes/genders as being caused by humors and heat. Most historians, therefore, speak hereby of the Hippocratic-Galenic model (Laqueur 1990; Klöppel 2008).

Alternatively, Aristotle (384-322 BC), a student of Plato, did not consider the hermaphrodite as a being of intermediate sex but rather as a being with redundant or double genitalia. Aristotle, who denied the existence of the female seed, declared that the hermaphroditic fetus was produced when the “nurturing matter”, contributed by the mother, was more than enough for one but insufficient for two fetuses. The hermaphroditic birth appeared when either the maternal matter or the paternal seed had not been fully mastered by the other; but, if the seed mastered the matter in one part but not in the other the foetus would have both sets of genitals. For Aristotle, hermaphroditism was a condition only of genitals, “like extra toes or nipples, in that it represented an overabundance of generative material” (Dreger 1998: 32). Therefore, from many accounts of this period it can be concluded that hermaphroditic beings were a recognized, if not fully accepted, part of ancient Greek and Roman societies. Sometimes, however, hermaphrodites were perceived as monsters and put to death or exiled. Both the Hippocratic-Galenic and the Aristotelian model survived to varying degrees during the following centuries in medical accounts. They were to differing degrees modified and adapted to the medical literature (Klöppel 2008).

In the following centuries, *teratology*, the science of monsters, emerged. *Teratology* regarded monstrous births as omens, predictions or divine warnings (Bates 2005). The Middle Ages witnessed a change in the perception of monstrosities: away from the consequences of carnal indulgence and bestiality to “divinations, forebodings, and examples of the wrath of God, as well as forms of glorification of God’s might and power” (Dreger 1998: 23). In the Middle Ages, the conceptions of sex differences and gender hierarchy were influenced by religion (mainly Christianity), which was the hegemonic discourse. Subsequently, the gendering of human beings and even of the world as a whole was produced and justified through the Bible. So-called monstrous beings were often killed on the grounds that, as Dreger reveals, “the ‘monster’ was a supernatural portent, a messenger of evil, a demonstration ‘of bad happenings’, and as such it deserved and even required prompt annihilation” (Dreger 1998: 33). The body was regarded as an instance of the sacred whole, a register of the cosmological order. Every being was considered to have a place in the logic of the world (Platt 1999). The body was essentially seen as a rational one, which replicated the larger cosmology and was both sacred and universal. In the 12th century, “the hermaphrodite seems to have represented an intriguing intellectual problem in an age determined to draw clear distinctions and boundaries, - logically, politically, culturally, and socially” (Nederman and True 1996: 515). The following Early Modern Period was characterized by the attempt to understand the body empirically, mostly through making it profane. The anatomical body, understood in structural terms, emerged in that period.

For the Early Modern Period, Levin and Solomon state, that “the once sacred body, surrounded by cultural taboos, suddenly became a worldly machine, a matter of interiority, a profane flesh to be seen into and seen through, a presence conceived as if its mechanisms would eventually be transparent for technological knowledge” (Levin and Solomon 1990: 519). Although a shift took place, a suddenness of change as implied here is arguably misleading. The sometimes slow and highly contradictory changes need to be examined carefully as various researchers have done during the last 20 years (Jones and Stallybrass 1993; Long 1999; Epstein 1990; Klöppel 2008). Moreover, social and cultural shifts started to influence the bio-medical discourse. The basic transformation of the order of things in the Early Modern Period occurred at several levels of culture and society. The social order became highly unstable because of changes in socio-economic organization, banking and trade, and changes in the demand for capital and credit. The Reformation, the breakdown of rural community structures and other factors had a great influence on a new individualizing process. From the middle of the 16th century on, notably since the publication of Ambroise Paré’s *On Monsters and Marvels* in 1573 (Paré 1982), a series of complex and contradictory events occurred which seemed to indicate the emergence of sex/gender as a crucial site for ordering and reordering knowledge on society and nature. The sex(ualiz)ed/gendered individual emerged in this period, and hermaphrodites surfaced in this new order of things as subjects with a natural role in society. In the Early Modern Period, medicine did not exercise hegemony over other discourses such as literature, politics, religion and jurisprudence. Furthermore, medicine itself was hardly unified on this issue. Rather, a coexistence of alternative conceptions of the body and heterogeneity within multiple medical and juridical accounts characterized the sixteenth, seventeenth and eighteenth centuries. However, the most basic distinction one can make is between the Hippocratic and the Aristotelians. Both schools differed in their theories of hermaphroditism as well as their above-mentioned notions of sex(ual) differences. Their contrasting accounts of hermaphroditism were transmitted into the Early Modern Period and were woven into the fabric of medieval and early modern medicine. Many accounts of hermaphroditism were written during the Early Modern Period.¹⁵ Hermaphrodites were objects of intense speculation and interest. Cases,

¹⁵ To mention a few: 1600 *De Hermaphroditum monstrorumque partum*, Caspar Bauhin; 1612 *Discourse on Hermaphrodites*, Jean Riolan; 1614 *Treatise on Hermaphrodites*, Jaques Duval; 1614 *On the Nature of Births of Hermaphrodites and Monsters* Caspar Bauhin; 1642 *Monstrorum Historia*, Ullisse Aldrovani; 1653 *Questionum medico-*

causes, classifications and especially status were broadly discussed. Lorraine Daston and Katherine Park, in their article “The Hermaphrodite and the Orders of Nature” suggest a unique fascination with hermaphroditism in the Early Modern Period and place the hermaphrodite “within new explanatory frameworks and linked with new fields of gender associations during this period” (Daston and Park 1995: 419).

The various written accounts can be read as the expression of a moral and social urgency concerning hermaphroditism, but they can also be placed within the tradition of ancient (later revived in the Renaissance) and medieval reflections on reproductive and sex(ual) differences. Older models still exerted great influence on the mode of investigation of hermaphroditic bodies but were increasingly undermined by early modern methodologies. 16th century thinking was still dominated by the Aristotelian notion of gender and reproduction, although a revival of Hippocratic medicine developed towards the end of the century. These two medical authorities, which can both be described as naturalistic, had different implications for sexuality and gender. Galen’s conceptualization of medicine, which was located in the Hippocratic tradition, regarded heat as the central determining concept. Within this theoretical framework, female organs were described as a version of the penis. The female hermaphrodite was generally understood to be a woman whose “member” enabled her to penetrate another woman’s vagina. This member was explained as a vagina, which “popped out” because of increased body heat. Sex/gender was therefore a manifestation of heat. In this tradition, sex/gender was not necessarily fixed at birth, but was unstable and could be changed during a person’s life. Despite the explicit insistence of this model on male supremacy, the unisexual model served to unfix the body of two-sexed/gendered categorical restraints (Laqueur 1990). Men were understood as having passed through a female developmental phase; this notion precluded a system of sexual dimorphism in the Early Modern Period. The revived authority of the Aristotelian notion of sex/gender in relation to redundancy or affluence is found in another dominant medical model of the Early Modern Period. The most notable difference between these two perceptions is that Hippocratics saw the cause of hermaphroditism in the entire organism whereas writers in the Aristotelian tradition saw hermaphroditism as the product of a local excess of matter and imbalance of male and female principles. For them male and female were not points on a spectrum but bipolarities which could not be mediated. In conclusion, one could say that the Hippocratic model of a sex/gender continuum posed a potential challenge to the male-female bipolar dichotomy, and therefore to the entire social order, while the Aristotelian model never questioned this order by viewing the existence of ambiguous bodies as superficial and leaving the dichotomous order intact. Both models adapted elements from each other (Laqueur 1990) and have been historicized as interchangeably dominating each other (see also Krämer 2007).

The mixture of these two different medical models can be observed in Ambroise Paré’s *On Monsters and Marvels* (Paré 1982). He operated from both approaches to the human body to explain the case of a woman who suddenly changed into a man. Transgressing the bounds of gender, with resulting inappropriate behavior, could cause a change of sex. This is observable in different recorded cases, for example that of Marie who turned into Germain (Paré 1982). This occurred during Paré’s lifetime in France, in Vitry-le-Francois between ca. 1510-1590. Marie had lived and dressed like a girl until the age of fifteen, then in the heat of puberty, the girl who had “no mark of masculinity” was chasing pigs and jumped across a ditch and “at that very moment the genitalia and the male rod came to be developed in him, having ruptured the ligaments by which previously they had been held enclosed and locked in” (Paré 1982: 32). After attending physicians and surgeons, who “found that she was a man, and no longer a girl”, Marie became Germain: she put on men’s clothes and from then on lived as a man. For Paré “the reason why women can degenerate into men is because women have as much hidden within the body as men have exposed outside; leaving aside, only, that women don’t have so much heat, nor the ability to push out what by the coldness of their temperament is held as if bound to the interior” (Paré 1982: 32). The term *degenerate* here does not imply that men were less perfect than women, yet bodily boundaries are described as fluid. However, at this point, Paré refers to the Hippocratic (Galenic) notion that heat causes the interior female genitals to externalize into male genitals. Yet, in the following explanation he clearly uses the Aristotelian understanding of the female to be an imperfect or defective male. Paré states that

now since such a metamorphosis takes place in Nature for the alleged reasons and examples, we therefore never find in any true story that any man ever became a woman, because Nature tends always toward what is most perfect and not, on the contrary, to performing [in] such a way [that] what is perfect should become imperfect. (Paré 1982: 33).

In Marie/Germaine’s case, jumping allowed the internal genitals to drop out. In other cases puberty or active sex, or anything which was inappropriate to the female gender were reported to have increased the

legalium, Paolo Zacchia; 1671 *The Midwives Book*, Jane Sharp; 1692 *Discursus juridico-philolocus de hermaphroditis*, Jacob Möller (see Klöppel 2008, Krämer 2007).

heat in the cold bodies of women (Parker 1993). This increase in heat was said to have caused them to become men. All women were thus potential men. However, the threat derived from this interpretation of the body did not yet gain its full strength; it would gain it later on. Such possibility of women crossing the sex/gender line maintains its threat through the centuries, although the responses vary.¹⁶ A bit more heat or acting the part of the other sex/gender could suddenly bestow a penis, which entitled its bearer to the mark of the phallus, to be designated a man. According to Laqueur, these changes

in corporeal structures, or the discovery that things were not as they seemed at first, could push a body easily from one juridical category (female) to another (male). These categories were based on gender distinctions – active/passive, hot/cold, formed/unformed, forming/formable – of which an external or an internal penis was only the diagnostic sign. Maleness and femaleness did not reside in anything particular. Thus for the hermaphrodites the question was not “what sex they are really”, but to which gender the architecture of their bodies most readily lent itself. (Laqueur 1990: 135)

In the Early Modern Period intense attention was devoted to hermaphroditism; it became associated with sexual, moral and theological issues clearly linked to the subjects of sodomy, transvestism and sexual transformation. These subjects threatened the orders of society in the Early Modern Period because they blurred the social distinction of hierarchical gender roles, which were necessary to be upheld in all these ruptures of the order of things. Paré formulates this threat: “For some of them have abused their situation, with the result that, through mutual and reciprocal use, they take their pleasure first with one set of organs and then with the other: first with those of a man, then with those of a woman, because they have the *nature* of man and of woman suitable to an act” (Paré 1982: 27). After his remarks about hermaphroditism, Paré immediately moves to a discussion of sex between women. This association of sex and sodomy was characteristic for how the term hermaphroditism became clearly associated with sex/gender related subjects such as male and female sodomy¹⁷ and transvestism. It seems as if the term hermaphroditism became associated with practices that appeared to blur or erase the lines between the genders; it became emblematic of all kinds of (sexual) ambiguity. Nevertheless, during the 16th century it was still assumed that nature would show itself in the mature hermaphrodite through attraction to the “opposite” sex. Therefore, it was left to the person in question to decide in which role they wanted to live: no medical or other authoritative consultation was required. Sex/gender was not predetermined through bodily boundaries based on medical investigation. Sex/gender was not a lifetime fixity but a temporary examination of appropriate sex/gender behavior. According to Laqueur, the shift from the *one-sex model* to the *two-sex model* took place during this time. He notes that “during much of the 17th century, to be a man or a woman was to hold a social rank, to assume a cultural role, and not to *be* organically one or the other of two sexes/genders. Sex was still a sociological, not an ontological, category” (Laqueur 1990: 142). Therefore, a hermaphrodite could be regarded as having two sexes, between which s_he¹⁸ could make a social and juridical choice; there was no true, deep essential sex/gender that differentiated the cultural woman from man.

With the 17th century, however, came an increase in the reliance on outside testimony to determine the hermaphrodite’s predominant sex/gender. The threat that derived from this cross-mixture of sex/gender boundaries is obvious in the case of Marie/Marin that appeared in 1601 in France. The woman Marie publicly declared at the age of twenty-one that she was in fact a man, changed her name to Marin, put on men’s clothing and declared his intention to marry another woman. The subsequent prosecution and sentencing to death, based on the accusation of sodomy, was then relaxed after examination by a physician who argued that the (genital) member, which was initially defined as an enlarged clitoris, was rather a small penis. The death penalty was suspended on the condition that Marie/Marin wear women’s clothing and remain celibate until the age of 25. This case occurs exactly at the peak of the shift from the system of distinguishing sex/gender by social factors to the system of scientific authority. According to Katherine Long, Caspar Bauhin and Jaques Duval (both publications dated 1614) insisted on medical procedures and invasive examinations to assign the proper sex related to reproductive functions and therefore the specific role in society (Long 1999). Thus, the 17th century brought a shift in the representation of sex/gender accompanied by a change in the modes of scientific discourse.

Regarding the accumulation of medical accounts of hermaphroditism during the 16th century, it can be seen that the fear of sexual fraud surrounded all forms of sexual ambiguity; therefore, these forms

¹⁶ As will become clear, the threat of women crossing the gender line will later on also be banned by the means of surgery. Most “intersex surgeries” are performed to prevent a person living as a woman having a penis.

¹⁷ “Female sodomy” is not a synonym for the term “lesbianism”. As Foucault has shown, the category of the homosexual only emerged at the end of the 19th century as a category of identity. Before this time, “female sodomy” only described female same-sex/gender acts. The term tribadism would also be used, albeit not as an identity category as which “lesbian” would be used in the 20th century.

¹⁸ In this dissertation, I use the terms s_he, him_her, and his_her to designate a space by the _ that includes people who do not feel that the pronouns or the pronominal adjectives of he/she, his/her, him/her denote their identities. This is done in line with the author s_he who published an article called „Performing the Gap – Queere Gestalten und geschlechtliche Aneignung“ the German magazine *arranca* Nr: 28, (<http://arranca.nadir.org>)

needed to be prohibited by investigation, definition and classification. Daston and Park suggest that “it was the fear of sexual fraud and malfeasance, surrounding all forms of sexual ambiguity that disqualified the hermaphrodite’s own testimony and demanded that of doctors, surgeons and midwives instead” (Daston and Park 1995: 425). The growing anxiety over so-called sexual ambiguity demanded a different system of classification and categorization to that which featured in ancient and medieval times. Numerous explanatory systems were drawn together to find new ways of defining individual status, hierarchical relationships, constraints, and responsibilities, as well as to install a new social order founded on the production of scientific knowledge. Many historians point to this as a scientific revolution during the 17th century (e.g. Shapin 1998; Cohen 1994). The Enlightenment coincided with and helped to produce immense shifts in Western society. With the arrival of the Enlightenment, the power of religion and religious authority began to decline with regard to sex/gender matters. The power of the Church was challenged by new elites whose authority was drawn from the increasing prestige of the natural sciences. Robert Nye gives three main characterisations of this shift:

First, the family unit continued to be recognised as the primordial sexual space, with procreation and child rearing as its principal task. Second, the divine ordinance that made all humankind into the sons or daughters of Adam and Eve was firmly sustained by the findings of modern natural science on the differences between the sexes. And third, the newly emergent liberal and democratic order readily embraced this new knowledge and legitimised it in law, much as medieval and early modern politics had used dogma to deepen and extend their power. (Nye 1999: 67)

Nye, however, ignores the fact that the family unit also changed its profile. Because of the dissolution of agricultural societies families became smaller, had fewer generations present in one household and servants predominantly served middle class families (see Honegger 1992). The heroic age of the scientist was dawning; it claimed that the power of human reason was sufficient to identify laws of science that would lead to human progress. From 1700 onwards, sexuality and therefore also sex/gender became tied to natural biological processes: they were now seen as determining the person’s identity. The Enlightenment inaugurated the science of the two sexes/genders. This shift can be regarded as the development of a scientific gaze, which would become *the* authority in sexual matters from that point onwards. Fabian Krämer describes this development as the new privilege of the scientific expert to diagnose and to give a name, just as the early colonists did to their “discoveries” (Krämer 2007: 52). Intersexualization is based on these processes in scientific expert knowledge production and had its origin in the scientific revolution.

By 1750 the increased medicalization was clearly visible in George Arnauld’s *A Dissertation on Hermaphrodites* in which he categorizes the hermaphrodite. He divides people into perfect, imperfect, predominantly male and predominantly female (Donoghue 1993: 51). Arnauld focuses on genitals, and explains that a swollen clitoris can appear in many women, but only in the female hermaphrodite does it become erect and frees itself from the labia. In many cases the hermaphrodite was referred to as a woman suffering from macroclitorideus (enlarged clitoris); thus, the term implicated women who were discovered to disobey their appropriate place of the sexed/gendered society by seeking access to another status in society.¹⁹ Furthermore, this new definition implies what a normal, heterosexual woman should look like. Clear anatomical borders became installed for the first time, while the figure of the hermaphrodite served as the abnormality that helped define the norm. From this point onwards, hermaphroditism was defined through “deformed” anatomy and clearly connected to the transgression of sex/gender boundaries. Daston and Park see

rather a conjunction of changing medical ideas with a general climate of acute male anxiety about the very issues brought to prominence by the new interpretation of the hermaphrodite as a being of intermediate sex – especially the issues of sodomy and other sexual crimes, and the proper relationship and boundaries between men and women. (Daston and Park 1995: 430)

From this moment it was possible to explain “anomalous beings” in terms of variations of normal and abnormal development. The domestication of the monster was achieved by the newly emerging natural sciences, whose power and authority over the matters of life increased during this time. This new ordering system of bodies colonized the “extraordinary” body by defining, categorizing and classifying it in relation to the natural order of things. By transferring hermaphroditism and other monstrosities from mythology into the category of pathology, the medical discourse and medical practice became the source of judgment. Monsters were understood in terms of an analogical relationship with respect to the norm. Now it was medicine, which provided reasons for tolerance or intolerance against people classified as abnormal. Hermaphrodites could serve as an anomaly reassuring the norm. Medical professionals started assigning the *true sex* of a person. Medicalization therefore teamed up with the conqueror science advancing through

¹⁹ As the case of Marie/Marin has shown, Marie’s “enlarged clitoris” had to be redefined as a “small phallus” in order for her to be allowed to live.

human bodies. Now that the natural phenomenon was named as such, it was necessary, and possible, to control and discipline it.

During the following decades of the 19th century medical professionals became more prestigious and more aligned with science. More people were seeing doctors and bio-medicine was on the rise, including gynecology. Increasing numbers of people had access to medical care and became subject to genital examinations. Consequently, an increasing number of hermaphrodites were discovered. The opportunities to document these cases were through the increasing number of medical publications at that time. The consequence was that medical practitioners became aware of the phenomenon of hermaphroditism which turned out not to be as rare as previously thought. “The years from around 1860 to 1870” as Foucault suggests, “was precisely one of those periods when investigations of sexual identity were carried out with the most intensity, in an attempt not only to establish the true sex of hermaphrodites but also to identify, classify, and characterize the different perversions” (Foucault 1980b: xii).

Charles Darwin, amongst others, laid the foundation for this shift. In the Darwinian model, sexual behavior focused on reproduction and the natural selection of males and females according to their role in both reproduction and resource competition (Darwin 1859). This evolutionary biological background influenced the notion that human beings are solely organised around reproduction. The core of Darwin’s thought was that the higher the organism on the ladder of life, the more exquisitely differentiated the male and the female of the species. Working within the Darwinian tradition of sexual dimorphism, late modern sexology developed the concepts of male and female as innate structures in all forms of life, including human beings. Heterosexuality was therefore teleologically necessary and regarded as the highest form of sexual evolution.

Before and during the 19th century crucial reorganisations took place in Europe. Secularisation, industrialisation and warfare demanded new structures to guarantee social stability. The nuclear family emerged as a key unit of the Western nation states; it was within this nuclear core of society that the future workforce would be produced. Within this reproductive framework, same-sex/gender desires and practices were a problem to be dealt with as they were regarded as aberrations from the procreative norm. The family was viewed as the place of reproduction, and every disturbance of this institution required revelation. “Sexuality” as the palladium of reproduction came under observation. The late 19th century was a time of anxiety in Europe. Politicians were discussing the declining birth-rate and the increasing numbers of women who never married. The first Women’s Movement and Suffragettes expanded political activism and brought up the Woman Question²⁰. But what was one to do if a woman were hard to define? The recently named “homosexual” was being widely discussed and physicians “were already feeling rather worried about the instability of political-sexual identities” (Dreger 1999: 6). Edward Carpenter’s *The Intermediate Sex* (1896) depicts these social changes at the turn of the century. He states that recently, “with the arrival of the New Woman, many things in the relation of men and women to each other have altered, or at any rate become clearer” (Carpenter 1921 [1896]: 16). Carpenter adds that “the growing sense of equality in habits and customs – university studies, art music, politics, the bicycle, etc. – all these things have brought about a *rapprochement* between the sexes” (ibid.). Edward Carpenter argued for a different interpretation of the circumstances than most of his contemporaries. He actually argued for equality between men and women and seems to have been more or less immune to the Darwinian notion of exclusive sexual dimorphism. Carpenter continues:

It is beginning to be recognised that the sexes do not or should not normally form two groups hopelessly isolated in habit and feeling from each other, but that they rather represent the two poles of one group – which is the human race; so that while certainly the extreme specimen at either pole are vastly divergent, there are great numbers in the middle region who (though differing corporeally as men and women) are by emotion and temperament very near to each other. (Carpenter 1921 [1896]: 17)

Carpenter’s courage to handle these new social challenges, however, was very rare. Sufficient evidence exists that anxiety about sex/gender roles made many physicians sensitive, especially to sex(ualiz)ed/gendered identities and therefore also to their patients’ anatomy. Feminists and homosexuals who challenged sex(ualiz)ed/gendered boundaries at that time caused biomedical experts to search for tighter definitions of norms. The categories of female and male had to be defined clearly in non-overlapping ways to safeguard the two-sexed/gendered, heterosexual social system. Therefore, more bodies were discovered in their nonconformity and “fell into the ‘doubtful’ range” (Dreger 1998: 26). People who had no obvious and permanent *true sex* threatened natural sex/gender borders. Foucault describes the following:

²⁰ The Woman Question is here used as a general term for the political challenges of feminist movements at the end of the 19th century. Feminist movements differed immensely in their specific goals; however, all of them challenged the hierarchical order, discrimination, oppression and exclusion.

Biological theories of sexuality, juridical conceptions of the individual, forms of administrative control in modern nations, led little by little to rejecting the idea of a mixture or the two sexes in a single body, and consequently to limiting the free choice of the indeterminate individual. Henceforth, everybody was to have one and only one sex. Everybody was to have his or her primary, profound, determined and determining sexual identity; as for the elements of the other sex that might appear; they could only be accidental, superficial, or even quite simply illusory. (Foucault 1980b: viii)

Physicians were becoming unhappy with the idea that so many *true* hermaphrodites existed. The biomedical professionals gradually decided to tighten the classification of hermaphroditism. A reconfiguration of the category of *true* hermaphroditism became necessary in order to reduce the possibility of its existence in humans. Each case of doubtful sex had to be resolved in a diagnosis of *true* female and *true* male, which allowed the reduction of *true* hermaphroditism. Redefinition of old cases of *true* hermaphroditism as *pseudo* hermaphrodites became fashionable amongst professionals²¹. *True* hermaphrodites were literally extinguished not only from history but also in their physical appearance and ability. The physician Jonathan Hutchinson declared in 1896 that “whenever this [true hermaphroditism] is the case, the organs are never developed in perfection. The testes do not secrete semen, or the ovaries do not attain their functional activity, and this being who is in a sense bisexed is in another sense unsexed, and never attains the full development of either” (cited in Dreger 1995: 363). This perspective was founded on the differentiation of men and women by their reproductive capabilities, originating in Darwinist theories. If people had both testes and ovaries they were *true* hermaphrodites. The gonadal definition meant that every body could officially be exclusively one sex, which was a contribution to the strict separation between males and females and hence to the enforcement of the biologically defined *one-body-one-sex* rule (Laqueur 1990).

More and more physicians became interested in the phenomenon of hermaphroditism. The most notable figures were the Polish Franz von Neugebauer and the German Theodor Albrecht Edwin Klebs. By 1908 Franz von Neugebauer (1856-1914), Director of the Gynecological Section of the Evangelical Hospital of Warsaw and a founding member of the British Gynecological Society, had collected and analyzed more than 930 accounts of hermaphroditism. His collection was published in 1906 as *Hermaphroditismus beim Menschen (Hermaphroditism in Man; my translation)* and included a bibliography on hermaphroditism (Neugebauer 1906). To his contemporaries, the most striking outcome of his research was the discovery of sixty-eight marriages between persons of the same medical sex/gender. In light of the historical developments of the time this must have triggered serious concerns for the figure of the hermaphrodite: the possibility of crossing the increasingly policed sex/gender boundaries. The diaries of Alexina *Herculine Barbin* (1838-1868), edited by Foucault (1980b), exemplify the desire of the so-called medical experts to define one true sex in every person.²²

The German pathologist Theodor Albrecht Edwin Klebs (1834-1913) created a classification system published in 1876 in the *Handbuch der Pathologischen Anatomie (Handbook of Pathological Anatomy; my translation)* (Klebs 1876), which served to drastically decrease the number of people who could be defined as hermaphrodites. In Klebs’ system true hermaphrodites had to have at least one ovary as well as at least one testicle. Moreover, he divided them further into “true bilateral hermaphroditism” (with one ovary and one testicle on each side), “true unilateral hermaphroditism” (with on one side ovary and testicle on the other side one of them) and “true lateral hermaphroditism” (a testicle on one side and an ovary on the other). Finally, “false hermaphroditism”, the so-called pseudo-hermaphroditism, was defined as “doubling of the external genital apparatus with a single kind of sexual gland” (Klebs 1876, quoted in Dreger 1998: 145). This “false” hermaphroditism was further divided into two separate categories, the “masculine pseudo-hermaphrodite” with testicles and female genitals, and the “feminine pseudo-hermaphrodite” with ovaries and masculine genitals. Klebs thus reinforced the popular conception that there were two and only two sexes/genders, with a rare and unusual exception in the case of true hermaphroditism. Alice Dreger quotes Halliday Croom who emphasized the “importance of making early discovery of such cases, in order to save the miserable consequences, unhappiness, and divorce suits, even suicides, which may follow if they are not recognised and are allowed to proceed in error” (Dreger 1995: 341). The question remains whether this was meant to be for the sake of “the patient” and the partner. In general, as Geertje Mak puts it, “instead of offering the hermaphrodite the right to choose his or her own sex, they [the physicians] started to turn sex-gender consciousness into an object of medical investigation, into a measurable identity

²¹ For example the professionals G.F. Blacker and T.W. P. Lawrence (see Dreger 1995: 34-37).

²² Alexina Herculine Barbin was raised as a girl and became a female teacher in her_his early twenties. Her medical discovery as truly male actually only happened after her_his suicide, but medical attention was devoted earlier. This medical attention was caused by her search for support concerning her_his desire for her virginal girlfriend Sara. The seduction of Sara only became possible through “medical misdiagnosis” of Barbin’s sex/gender. Contemporaries assumed that it was the inappropriate social role that enabled Barbin to get access to female spaces and it was Barbin’s testes that made her_him desire Sara, a woman. Hence it was not the size of an organ but the use of it that was the problem. As Barbin insisted on behaving as the possessor of the phallus s_he could only be accepted through a reassignment as an appropriate possessor of such power: a man. With the growing acknowledgement of the definition of true hermaphroditism, Barbin came to be “legally” redefined as a true male and seen to be just a hypospade (hypospadias is defined as a deformity of the penis) (see also Mak 1997, 2005).

whose importance in relation to the final decision only they could define” (Mak 2005: 87). Along with the continuous redefinition of the essentials that made a true hermaphrodite, the essentials that made true males and true females were also changed. The emphasis on reproduction during the end of the 19th century brought immense attention to issues of sex/gender and sexuality.²³ The “anatomical hermaphrodite” challenged the traditional image of two distinct sexes/genders and the newly construed invert – the hermaphrodite in the soul – threatened the social heteronormative order of the nuclear family.

Following from the deep concern with sex(uality) during this time and a general professionalization of the sciences (such as medicine, biology, psychology, anthropology and so on), sexology became a scientific discipline. The pioneers of sexology were Magnus Hirschfeld, Havelock Ellis and Richard von Krafft-Ebing, all of them located in Germany or in the United Kingdom. They were highly invested in sexology in general²⁴ and homosexuality²⁵ in particular. Interestingly, most of them tried to foster public acceptance of homosexuality. The way they chose to reach this goal was by naturalizing homosexual desire. The category of sex became the foundation for sex/gender dichotomization and the stabilization of heteronormativity. The “psycho-sexual hermaphrodite” became a category of a mental state and was used to construe an “invert”. What I call “diagnosticism”, the compulsion to diagnose, features in the invention of the category of the homosexual as much as it features in the processes of intersexualization (Eckert 2009). In line with my argument about the processes of intersexualization I use the term homosexualization rather than homosexuality when it comes to the designation of a homosexual identity.

When Karl Heinrich Ulrichs published his first accounts on *Uranism* (his neologism for the invert) in 1868, he spoke about a *third sex*, which was hermaphroditic in the soul, not in the body (Ulrichs 1868).²⁶ Growing evidence of homosexuals’ anatomical normality, however, challenged the hermaphroditic model imposed by advocates of the third sex/gender, and the emphasis placed on the body shifted to the mind (Ulrichs 1868). In the following decades, the terms hermaphroditism and homosexuality became intermingled. The notion of the anatomically deviant transformed into the psychologically deviant. Homosexual inverts came to be seen as inhabiting the status of either a masculine woman or an effeminate man, according to their sexual orientation. In the notion of Darwinism, hermaphrodites *and* homosexuals were considered to be unfinished specimens of stunted evolutionary growth.

The rise of a new era of explanations of the world order had begun. Social phenomena and the development of civilization became located in a natural order of things. At the end of the 19th century, Darwinism was accepted and the idea of evolution with man at the top was established. Every being was considered to have a place in the evolutionary process of creation. Progress was signified by the greatest degree of sex(ual) difference, as well as procreative heterosexuality. The notion of sexual dimorphism as the pride of creation makes these ideas so crucial for the perception of hermaphroditism. In the tradition of Darwinian theories on the evolution of organisms through natural selection, the differentiation between the sexes became a sign of an evolutionary progress towards civilization (I elaborate on this phenomenon in chapter 6).

Richard von Krafft-Ebing presented congenital sexual inversion in his famous *Psychopathia Sexualis* (Krafft-Ebing 1903), the grand encyclopedia of sexual perversities according to Rosario (1997: 15) in four gradations. His classification system depicted the mixture of two concepts: the anatomical and the psychological. He distinguished between: (1) psychical hermaphroditism, where subjects are mainly homosexual but traces of heterosexuality remain; (2) homosexuality, where there is an inclination towards members of the same sex only; (3) viraginity (in women) and effemination (in men) which means that the invert’s psychical character corresponds completely with the invert’s sexual instinct; and (4) hermaphroditism or pseudo-hermaphroditism, where men’s bodies become feminized and women’s bodies masculinized and the subject’s physical form begins to correspond to the inverted sexual instinct (Krafft-Ebing 1903). The influence of this kind of understanding of hermaphroditism is also apparent in Magnus Hirschfeld’s theories.²⁷ He published the *Jahrbuch für sexuelle Zwischenstufen* (*Annual for sexual intermediaries*), which advocated the theory that all subjects were, to varying degrees, bisexual and/or transgendered and that sex was impossible to be categorized in any oppositional sense (Hirschfeld 1899-1923).²⁸

²³ Especially in Germany the protection of the “Volkskörper” (the nation body) was discussed as being threatened by non-reproductive sex and it came to concern also economical productivity in general. Eugenic discourses were fed by sexological knowledge production.

²⁴ Sexology developed expertise on subjects such as venereal disease, eugenics, sexual psychopathology, prostitution.

²⁵ The “homosexual” at that time was only discussed as appearing in men, lesbianism was hardly discussed, although Havelock Ellis presumed that female homosexuality was more common than in males but it was not regarded as a “social evil” as it was in men.

²⁶ Hirschfeld later modified Ulrichs’ theories on the intermediaries (in “sexual orientation”) for his categorisation of hermaphroditism in the *Jahrbuch für sexuelle Zwischenstufen*.

²⁷ Hirschfeld founded the “Scientific Humanitarian Committee” (Wissenschaftlich-Humanitäre Komitee (WHK)) in 1897 and used it as a medium to bring his struggle for homosexual emancipation to the fore.

²⁸ The rise of the homophile movement advanced the circulation of modern sexologist theories. The main attempt was to seek tolerance for homosexuality, for instance by linking it to hermaphroditism (as a pathological condition) or inventing the category of the third gender (in terms of sexual object choice). Early sexologists viewed homosexuality as an innate constitutional condition, but

However, sexology as a newly developed science was concerned with the belief that certain socially disadvantaged groups of people were intellectually inferior by nature. Thus, the bodies of, for example, the poor, criminals, non-white people and women were assumed to be primitive and diseased. After the invention of the category of the homosexual, the body that expressed deviant sexual desires joined this group of suspected degenerates. The invention of categories of distinctive sexual types (as Foucault has shown for the end of the 19th century) was continued in this tradition. Richard von Krafft-Ebing, in particular, brought the notion to the fore that same-sex desires were not just behaviors but inherent in the individual. He believed in the hereditary basis of inversion but he also thought it should and could be cured. His actual intention was to strengthen the “natural” status of homosexual men and women. Havelock Ellis also proclaimed “the organic nature of inversion” yet he assumed it to be curable. This was in contrast to Krafft-Ebing, the first to treat “homosexuality as neither a disease nor a crime” (Grosskurth 1980: 185). Krafft-Ebing made a distinction between perversity and perversion which were defined as vice and disease respectively (Krafft-Ebing 1903). Therefore, sexologists tried to fight the pathologization and criminalization of homosexual desire by naturalizing it. Sexologists described homosexuality as a product of hereditary degeneration and presented it as a harmless variation in human sexual behavior. The effects of this scheme extended into the following decades; biological determinism came to be a central issue in homosexualization and intersexualization. The quest to define homosexuality as an inherited bodily attribute peaked with the investigations of the *Committee for the Study of Sex Variants* that was conducted from 1935-1941 in New York. The participants of the study were volunteers with a history of homosexual relationships and were sent through various psychological and physiological examination processes. Jennifer Terry describes this case concerning the construction of the lesbian body. The researchers believed that genitals revealed masturbation, frigidity, promiscuity or lesbianism. They investigated and drew graphic sketches of female genitals to prove that the deviance shows itself in the bodily condition. Terry concludes that genitals became “indices of moral character” (Terry 1995: 143). This study depicted the “lesbian clitoris” as a clear threat to the actual “natural phallus” in men as similar in size and shape by using the term “hypertrophy” which would remain to describe hermaphroditism/“intersexuality” throughout the following decades. This specific case reveals how the heterosexual matrix wove itself into the perception of somatic features. It was founded on the following questions: What is acceptable concerning the make-up of genitals? Where is the border that can be drawn between the shape of genitals and the supposedly inherent deviance? How does “abnormality” in the mind show itself in the constitution of the body? This study reveals the changing status of the body as scientific proof of homosexuality. For the following decades the scientific quest to fix identity on bodily features would continue. In intersexualization it becomes especially clear that genital features acquired the status of a signifier for the threat to the “normal” heterosexual world, as I show in chapter 1.

According to Steven Angelides, the period of early sexology was marked by “the invention of the category of ‘sexuality’ in general, and the opposition of hetero/homosexuality in particular” (Angelides 2001: 17). Sexology with the invention of sexuality as a dominant feature of human nature completed the developments, which Foucault has described regarding the 19th century, in which he saw the notion of sex emerging as the secret:

The notion of “sex” made it possible to group together, in an artificial unity, anatomical elements, biological functions, conducts, sensations, and pleasure, and it enables it to make use of this fictitious unity as a causal principle, and omnipresent meaning, a secret to be discovered everywhere: sex was thus able to function as a unique signifier and as a universal signified. (Foucault 1978: 154)

It was not just the homosexual threat that needed to be reduced but sexuality suddenly became a field of study: thus, the academic discipline responsible for meeting this threat. However, by contributing to the pathologization of the hermaphrodite/“intersexual”, it unquestionably represented a continuous link between the construction of norm and anomaly. The deviant body of the homosexual is of high importance for the category of the hermaphrodite in this period. Hermaphroditism served as a tool to describe homosexual desire. Common terms were hermaphroditism of the mind or psychic hermaphroditism, although there was growing evidence for normal bodies of homosexualized people. However, the hermaphrodite became the signifier for two different kinds of deviance: first the disturbance of clear sex/gender distinction; and second, the trouble this phenomenon caused to the desired clear split between hetero- and homosexuality. Just as heightened attention was paid to the hermaphrodite, the term of bisexuality in relation to sexual desire or orientation emerged. This is *the* emblematic development in sexology talk connected to the moment in which homo- and heterosexuality were invented. As Angelides puts it: “whether explicitly defined or not at the moment of homo- and heterosexuality’s scientific

not all of them considered it pathological. Jennifer Terry and Jaqueline Urla state that “their most pronounced scientific legacy was the idea that the homosexual was an inherently different type of person, endowed with somatic and characterological features that distinguished this creature from normal people” (Terry and Urla 1995: 137).

intervention, the notion of a dual sexuality, let us call it bisexuality, is without doubt a logical or axiomatic component of such a dualistic structure” (Angelides 2001: 15). This dualistic structure was two-fold, a double bind system composed of the compulsory conceptualization of one as “both a man *and* either a heterosexual or a homosexual, a woman *and* either a heterosexual or a lesbian” (ibid.: 24). The concept of the hermaphrodite/intersexualized and that of homo-/bisexuality mark the epistemological alliance of sex/gender and sexuality.

Sigmund Freud’s psychoanalytical theories of sexuality influenced the scientific community and shifted the focus from the body to the psyche (although the notion of somatic qualities of the homosexual was still held up). Freud’s theories on innate bisexuality triggered a specific notion of hermaphroditism as an ordinary stage in human development (as I show in chapter 1). Freud established the connection between the psyche and the body in relation to civilization in general and to maturity on the individual level. Freud’s theories relied heavily, just as most of his contemporaries’ theories, on a Darwinian perspective of life and social organization. In Freud’s psychoanalytical accounts, however, the development of the psyche came to be linked to the body (though arguably more or less intensely and with different emphasis throughout his works). Freud’s earlier writings were significantly more open to the fluidity and openness of psycho-sexual development and only later became focused on a rigid heteronormative organization of embodiment, subjectivity and desire. The researchers whose work is interrogated in this dissertation focus exclusively on the later writings and thereby re-install static, deterministic and essentialist notions. The heteronormative and dichotomous sex-gender-sexuality-system which they reaffirm time and time again is based on a specific reading of Freudian psychoanalysis and erases another.

Richard Goldschmidt (1878-1958) coined the term “intersexuality” in his genetic sex/gender determination theories. He stated that “bipolar” sex/gender difference exists but would only manifest itself on the basis of a “bisexual potentiality” (my translation, German: bisexuelle Potenz) and only as a “quantitative” and therefore a “relative” differentiation (Goldschmidt 1916, 1938; see also Klöppel 2008). The highly influential and widely read *The Evolution of Sex* by Patrick Geddes and Arthur Thomson from 1889 stated that “hermaphroditism is primitive; the unisexual state is a subsequent differentiation. The present cases of normal hermaphroditism imply either persistence or reversion” (Geddes and Thomson 1889: 80). The notion of natural selection made it possible to view hermaphroditic bodies as anomalous “throwbacks”.²⁹ Therefore, the hermaphrodite came to be seen as atavistic, as unfinished in its development yet as having a place in the natural order of things albeit in need of normalization. This phenomenon will be of central interest in my analysis of the following decades.

This brief historicization of the early processes of intersexualization has shown how the foundation of heteronormativity became justified by science. With the rise and spreading acceptance of naturalization/normalization, what Foucault described as biopower, was now institutionalised by the newly emerging disciplines, which defined every-body into the spheres of the normal and the abnormal. Foucault, in *Discipline and Punish* characterises disciplinary as an atomizing force:

Instead of bending all its subjects into a single uniform mass, it separates, analyzes, differentiates, carries its procedure of decomposition to the point of necessary and sufficient single units. It “trains” the moving, confused, useless multitudes of bodies and forces into a multiplicity of individual elements – small, separate, cells, organic autonomies, genetic identities and continuities, combinatory segments. Discipline “makes” individuals; it is the specific technique of a power that regards individuals both as objects and as instrument of its exercise. (Foucault 1977a: 170)

The knowledge of embryology, biochemistry, endocrinology, psychology, sexology and surgery enabled physicians to control the matters of sex/gender and sexuality in regard to social organization. The institutional authority over deviance was now clearly located inside the medical establishment. As the increasing discourse of bio-power gained influence, the hermaphrodite became fully naturalized.³⁰ Unfortunately, the aim of sexologists to make homosexuality accepted only reinforced the dichotomy between normal and abnormal, between heterosexuality and homosexuality, between natural and unnatural. The hermaphrodite played an important role, understood either as a bodily condition or as a mental condition (newly defined and modified according to the newly appearing emergencies of social and cultural changes). The body of the hermaphrodite/intersexualized was the playground on which scientists fought their battle. The perception and importance of hermaphroditism/“intersexuality” was, as a result of social circumstances, shifted to the field of sexual inquiry through a purely social or legal interest. A new

²⁹ Geddes and Thomson discuss Darwin’s theory of sexual selection in full length in the first chapter of their book (Geddes and Thomson 1889: 3-31). I will elaborate on the influence of social Darwinism on sexology and psychoanalysis in chapter 6.

³⁰ Naturalization means that natural science is the medium that can explain the natural law in which the hermaphrodite is settled. Naturalization means the process in which an uncertainty is rendered unproblematic or “natural” or self-evident. In the context of intersexualization naturalization is a basic feature, which interlocks with normalization in the sense that that which is seen as “natural”. Sexual dimorphism is that which is regarded as natural, however, it is constructed by means of surgical intervention to reaffirm that hermaphroditism/“intersexuality” is an “experiment of nature” and therefore needs to be normalized.

dichotomy was created at the cost of the hermaphrodite. Since then, there is not only the dichotomy between male and female, but also a new one: the dichotomy between homosexual and heterosexual. In the following decades, the hermaphrodite suffered two fights, one against the blurring of the sexes/genders and one against the blurring of “straight” desire and sexual practices represented by the terms of bisexuality and hermaphroditism merging. The term “intersexuality” was coined and freed the hermaphrodite from any mythological or religious background for its scientific investigators. Medicalization was completed - intersexualization on the rise.

Section 1: The Clinic

Introduction Section 1

In this section on what I demarcate as the theoretical space of the Clinic, I chose to analyze historical moments in intersexualization. I thereby look at the development and application of the gender-concept and its subcategories in the processes of intersexualization since the 1950s in the United States of America (USA). I argue that intersexualization is the process by which human beings are separated into men and women via biological and psychological characteristics – it therefore concerns every body. Some bodies, however, become subjected to more rigid modes of separation than others through surgical intervention. I show that intersexualization involves psycho-medical theories of the body, identity and sexuality developed by and enacted by clinics that diagnose as well as treat “intersex” patients. In this clinical space psychoanalytical theories were called upon to develop the gender-concept, which is based on the distinction between sex and gender. In the development of this new concept further demarcations were made, such as gender role and gender identity. These subcategories have been continually built upon and developed in relation to their complement sex. Current treatment paradigms are still based upon these by now historical theoretical developments.

The focus of chapter 1 and 2 is on two researchers based on each coast, John Money in Maryland and Robert Stoller in California, who were trained in psychology and psychoanalysis respectively. The treatment recommendations, which have been instituted by Money, have had immense influence on intersexualization in the USA.³¹ Robert Stoller’s publication on Sex and Gender (1986) was eagerly adapted for feminist purposes. In chapter 3, I look at this history of adaptation mainly through a focus on feminist biologist Anne Fausto-Sterling, who was the first one to work on intersexualization from a critical perspective.

John Money (1921-2006) studied psychology at Victoria University College in New Zealand where he was born and later at Pittsburgh University and Harvard (USA). He later became a psychologist at Johns Hopkins Hospital, Baltimore where he worked until his retirement. Robert Stoller (1925-1991) was trained at Stanford Medical School, CA and Columbia University, NY. He earned his MD in psychoanalysis at the University of California, San Francisco and later became a professor for psychiatry at the Medical School at the University of California, Los Angeles and a researcher at the UCLA Gender Identity Clinic. Both were well-known figures in psycho-medical and sexological research and were central to developing the medical field for “intersex treatment” with their constructivist essentialist approaches. I suggest that Money and Stoller were constructivists in the manner that they worked with the assumption that anybody can become a man or a woman, but they were essentialist, albeit differing in this from each other, in assuming that these were the only two options for anybody.

In the first chapter on *Pathologization and Surgery* I focus on the first publications of the “treatment recommendations” in 1955 (Money et al. 1955b) and those publications, which accompanied them to provide the psychological and psychoanalytical rationales of the recommendations. These accounts argue with the necessity of a stable gender role while calling upon the doctor to maintain boundaries between the sexes. The continuous invocation of sex in gender includes, as I argue, the demarcation of embodiment and identity into one of two complementary poles. I show that Money et al. contradicted their initial findings in their research with advocating genital surgery. In order to justify this, they based their arguments on a selective reading of Freud, mainly the concept of innate biology. The enforcement of a clear-cut gender role reflects the cultural and political importance placed on reproduction, focusing as it does on reproductive organs. Yet, in the processes of intersexualization it becomes clear that it is not these organs that matter foremost, but their esthetico-functional alignment to the representation of the cultural genitals³². In the process of “making” men and women the forced organization of human beings into two “opposite” sexes and genders features prominently. In the second part of this chapter, I focus on the surgical interventions, which are requisite in intersexualizing treatment for the production of “matching” genitals. I focus on the rationales in Money’s work and those clinicians who are currently still performing and arguing for surgery.

In the second chapter on the *Essentialization of Gender Identity* I interrogate Robert Stoller’s research in which he also draws upon and reinvents specific aspects of Freudian psychoanalysis, mainly the drive

³¹ In Europe, their theories were translated, discussed and partly put into practice, yet, also often defeated (Klöppel 2008). In this dissertation, I will focus on the beginnings of intersexualization in the USA in the 1950s since it was from this geo-political location that intersexualizing research in the particular manner of John Money and Robert Stoller sprang and from which it was transported into other parts of the world.

³² “Cultural genitals” is a term that Suzanne Kessler and Wendy McKenna have coined in *Gender: an ethnomethodological approach* in 1985. They used it to indicate that genitals are actually never seen, they are attributed on the grounds of cultural signifiers of gender, such as cloths, habitus and so on.

theory. By introducing the concepts of a biological force and of a core gender identity Stoller implies a dimorphic essence on the physiological and the psychological level. The shift from the concept of sexual identification to that of a core gender identity is explored through Stoller's postulated biological force, which he used to essentialize the heterorelational system. Stoller furthermore proposes a protofemininity and "masculinity as an achievement" in his research into "transsexuality" and "intersexuality".³³ As I demonstrate below, the invention of a hermaphroditic core gender identity that is produced by a hermaphroditic body testifies to what Gabriele Dietze called constructive essentialism (2006b). This move prefigures his research in non-Western societies, which is the focus of section 2.

In the third chapter on *Feminist Biology and the Five Sexes*, I briefly map out feminist critique of the gender-concept and its inherent implication of dimorphic sex. I then trace critical approaches to the body in feminist literature which have engaged with biological determinism on several levels. I then focus on an analysis of Anne Fausto-Sterling's proposal of the *Five Sexes*. I suggest that Stoller's (and Money's) research resonate in Fausto-Sterling's critical biological account. The gender-concept and its subcategories of sex and gender cannot but be reiterative of a heterorelational system and are therefore normalizing. I show that in Fausto-Sterling's proposal the continuum is evoked which reaffirms the two heterorelational poles of maleness/masculinity and femaleness/femininity. Moreover, I argue, heteronormativity cannot be overcome by this kind of approach to intersexualization yet suggest that the philosophical approach be the new feminist materialist are promising in regards to a future intervention into intersexualization. My focus in this chapter is however on the historicization of intersexualization in critical feminist sex studies.

1. Pathologization and Surgery

Introduction

In this chapter I first situate John Money in the academic environment: the space which led to intersexualization through the development of a treatment paradigm based on the notion that newborns with "ambiguous genitalia" were "psychosocial emergencies", and, as such, should be "reassigned" male or female as soon as possible. The aim of the treatment promoted in the research by Money et al. was that "patients" should "establish their gender with unambiguous certainty" (Money et al. 1955b: 294).

From 1955 to 1957 the *Bulletin of the Johns Hopkins Hospital* published six articles on so-called hermaphroditic conditions including an article on "Recommendations Concerning Assignment of Sex" by the authors John Money, Joan Hampson and John Hampson (Volumes 96/6, 97/4, 98/1). I chose this publication series since it marks the "birth" of the new treatment paradigm installed in intersexualization.³⁴ In the first part of this chapter I pin-point specific themes throughout the publication series and analyze how they develop the gender-concept based on the distinction between sex and gender (here gender role). I will show how Money et al. stress the necessity of surgery in order to align the genitals to the sex of rearing. This treatment protocol was called "sex reassignment" and aimed at the best sex, and the optimum gender of rearing (OGR). The direction of this "sex reassignment" procedure was dependent on the appearance and functionality of the genitalia and/or if they could surgically be so altered (in accordance with the assigned gender role as either penetrating or penetrable). Money determined the crucial age of this "sex reassignment" procedure at around eighteen months (Money et al 1955b: 289). Surgical intervention was central in the determination of the best sex – the OGR. Namely, the surgical interventions of clitor(id)ectomy and vaginoplasty were, and are still, practiced in "intersex management" and are therefore of central interest. The construction of a penis is rarely practiced (only in the case of hyperplasia); the reasons for which is discussed in the second part of this chapter.

In the course of this chapter, I touch on discursive and material preconditions, which surrounded and impregnated Money's theoretical and practical engagement with what he called "psychosexual emergency", such as psychoanalytical referencing and surgical techniques. My intention is to demonstrate

³³ As I will show with the analysis of Robert Stollers development of the concept of gender identity, intersexualization is intrinsically related to transsexualization, since they are both dependent on the distinction between sex and gender. Moreover, Stoller's theory of the biological force experienced a dramatic shift after he discovered that a patient of him has deceived him by claiming to be "intersex". He had to change the diagnosis to transsexuality. In the life experience of intersexualized and transsexualized people however, both diagnoses function differently. Intersexualized people experience compulsive surgery as infants which they have not given consent to and transsexual or transgender people often want surgery. However, this discourse will not feature in my dissertation.

³⁴ John Money will continue his research on hermaphroditism/"intersexuality" during the second half of the 20th century. His name will enter the public discourse on sex assignment surgery through the so-called John/Joan case through the report by John Colapinto in 2000. His academic publications include research on most of the so-called pathologies or perversions in sexology.

how Money et al. constructed their research-object and the supposed psychopathology of the hermaphrodite as well as how they ignored the fact that their sample did not show any statistical significance regarding this supposed psychopathology. They construe the concept of gender role in order to make their treatment recommendations comprehensible. Through references to stereotypes of masculine and feminine behavior and appearance they justify the necessity of developing a stable gender role that is congruent with one set of surgically constructed genitals. The essentialization of gender role is fostered by the reference to language by arguing that once ingrained it is not reversible. I subsequently analyze how the trope of innate bisexuality is woven into their neo-Freudian approach to the psychosexual; moreover, I uncover how Money et al. exclusively use those theories by Freud which feed their argument of the bi-polarity of gender roles, which they base on the theory of dimorphic sexes. In the second part of this chapter, I demonstrate how universalized stereotypes about people who are supposed to live in a feminine gender role were used to consolidate the phallogocentric and heteronormative organization of society. As I will show, the reinforcement and reinscription of phallogocentrism is *literally* “managed” by surgical techniques, which erase the (“enlarged”) clitoris because it is considered to be phallic flesh that threatens the bi-polar construction of sex and gender on a psychological as well as biological level. I demonstrate that intersexualization is ongoing and current debates reflect that Money’s treatment recommendations are neither outdated nor have lost their influence. Anybody who currently takes part in intersexualization either as a researcher or clinician references their work, if not to Money directly then to his collaborators or students.³⁵ The current debate on the change of name of intersexuality into DSD (Disorder of Sexual Development) reflects Money’s influence on this deeply pathologizing and medicalizing discourse and is also touched upon towards the end of this chapter.

1.1 The Gender-Concept: Sex and Gender Role

In 1952 John Money wrote his PhD thesis entitled *Hermaphroditism: An Inquiry in the Human Nature of a Paradox* at Harvard University (cited in Karkazis 2008; Klöppel 2008). His dissertation sought to demonstrate that anatomy does not determine a person’s subjectivity with regards to gender, but most astonishingly, Money ignored his own finding and later started building a theory around a different, if not to say opposite, paradigm. This event will not remain a singular and isolated instance; Money continuously contradicts his own findings in order to establish his treatment mantra. For infants deemed to have “ambiguous genitals” he began advocating surgery within the first eighteen months after birth to match the genitals with the sex assigned to the newborn. This development may partly be because of the academic environment Money joined when he started researching at Johns Hopkins University. Also at Johns Hopkins was Hugh Hampton Young, a genitourinary surgeon, who started publishing on hermaphroditism in 1921 and gained experience on treating urological conditions (Young and Davis 1926; Karkazis 2008: 43). Lawson Wilkins (1894-1963), who founded the first pediatric endocrine clinic in 1935 at the Harriet Lane Home in Baltimore, a children’s clinic associated with Johns Hopkins, joined Johns Hopkins later to take the position of director at the Endocrine Clinic (where he continued his work on the newly synthesized hormone cortisone). In 1950 Lawson Wilkins published *The Diagnosis and Treatment of Endocrine Disorders in Childhood and Adolescence* (Wilkins 1950). In this publication he promoted the idea that sex reassignment in intersexualized newborns should be decided according to the appearance of the external genitals and not according to the gonads.³⁶ Sex reassignment should be followed by cosmetic genital surgery and the application of hormones (Wilkins 1950: 274). However, he still cautioned against radical plastic surgery but in 1955 he also argued that sex reassignment, including genital surgery, should be pursued in the first eighteen months of life (Wilkins et al. 1955: 297). Wilkins’ research was based on a sample of 100 intersexualized people who were later also seen by John Money, Joan Hampson and John Hampson at the Johns Hopkins University. While Wilkins’ main focus was on promoting the use of cortisone to make bodies conform to stereotypical secondary sexual characteristics, he advocated surgery as the implicated procedure to create artificial genitals that measure up to certain parameters of “appropriate” length, width and depth. Wilkins formed an “expertise” team on hermaphroditism at Johns Hopkins, of which John Money and John and Joan Hampson were all members. They worked mainly with the theoretical frameworks of neo-psychoanalysis and behaviorism. Money et al. picked up this particular aesthetic-functional approach and started developing psychological theories to support it. Yet, in order to

³⁵ John Money’s collaborators and students are numerous, and most of them managed to get careers if not through intersexualization then on issues of sexuality in general. Money co-published with Anke Ehrhardt, Patricia Tucker, and Robert Peterson, Heino Meyer-Bahlburg and Claude Migeon and many more.

³⁶ Up until this time, the gonads (ovaries or testes) were predominantly used to determine a person’s *true sex*. However, a variety of competing theories were developed by scientists in the sexological tradition such as Havelock Ellis, Magnus Hirschfeld, Karl Neugebauer and Krafft-Ebing, none of who agreed on one single theory as demonstrated in the introduction (see Klöppel 2002, 2003 and 2008).

first determine the true sex of the intersexualized child several testing tools, such as chromosomal or hormonal tests, are necessary since the gonads were dismissed as the sole indicator for a person's true sex. The internal gonads (tissues of ovaries and testes) would albeit also still play a role in the overall test results. In Money's theory, however, the results of these tests were constantly dismissed as irrelevant factors for the subsequent treatment procedures. All these tests were used to define a true sex even though the final decision was made according to the presumed best sex, the optimum gender of rearing (OGR). Based on this clinical work and research, Money published more than thirty accounts on hermaphroditism/"intersexuality" throughout the years and as a result was deemed the authority. Much of the intersexualizing literature from the 1950s onwards in the USA has been written or co-written by Money. However, I regard the publication series from 1955 to 1957 as the origin of the new treatment paradigm and a constructivist essentialist view on sex and gender, which is why I focus on these below.

The question of psychopathology

The paper "Sexual Incongruities and Psychopathology: The Evidence of Human Hermaphroditism" published by Money and John and Joan Hampson in 1956 offers an overarching view of the theories they championed in their publication series. This paper was based on 94 people (the earlier papers published in 1955 were on a smaller number of people), who are categorized by their respective "psychopathology". There is no report on genital surgery in this sample but it is safe to assume that none of them had surgery as infants, since this is the practice that Money will introduce. Interestingly Money et al. state in the introduction of their paper that:

In 95 per cent of our 94 cases, gender role and orientation corresponded unequivocally with the sex of assignment and rearing, irrespective of incongruities between this pair of variables, on the one hand, and one or more of the other five variables of sex, on the other hand. (Money et al. 1956: 43)

This quote is based on the conceived seven variables the list of which was published one year earlier. As they state above, their sample did not show any signs that gender role and orientation did not correspond with assigned sex and sex of rearing. Meaning, that all the people in their sample, if they were raised as girls felt to be women and if they were raised as boys felt to be men independently from the other factors listed below.

1. Assigned sex and sex of rearing
2. External genital morphology
3. Internal accessory reproductive structure
4. Hormonal sex and secondary sexual characteristics
5. Gonadal sex
6. Chromosomal sex
7. *gender role and orientation as male or female*, established while growing up

(Money et al. 1955a: 302, my emphasis)

Most people in their sample, therefore, irrespective of their external genitalia, their gonads or their secondary characteristics, felt to be the sex/gender which they lived in. In terms of their assessment of psychopathology Money et al. stated that "in only 5 of our 94 patients, therefore, was there any question of psychological nonhealthiness on grounds of a demonstrably ambiguous gender role and orientation" (Money et al. 1956: 43).

Accordingly, after categorizing each of the 94 individuals as "healthy", "mildly nonhealthy", "moderately nonhealthy", and "severely (morbidly) nonhealthy" only 5 were put in the last category as being psychologically "severely (morbidly) nonhealthy" (ibid.: 44). This number seems rather small if not of little significant value. Money et al. fail to provide a comparative sample of non-hermaphroditic patients, however, it is safe to assume that in a control sample there would not be a significantly smaller number of so-called "severely (morbidly) nonhealthy" people. The question remains what made Money et al. believe that their research into sexual incongruities and psychopathology made sense at all if their sample of people did not show any evidence that psychological nonhealthiness was of remarkably higher incidence in intersexualized people. What made them continue with their research if there was no significant evidence of psychopathology in relation to what they call "sexual incongruities"? What is actually the relevance of their psychological research, one wonders, if they have to state that "the most noteworthy finding of this study of psychologic healthiness in hermaphrodites is the conspicuous absence of severe psychologic disorder" and if the fourteen people "rated moderately nonhealthy were, apart from their rating a diverse and heterogeneous group" (ibid.: 46), just as one would suspect it in a sample of people without the criteria of intersexualization? Thus, Money et al. created a (psycho)pathology where there was none. The scientific

processes, which define the pathological, work from the assumption of the normal but in the same vein install the norm via pathologization.

From this list different so-called intersex conditions were composed and extracted. The list that has been conceived by Money et al. testifies to a deployment of naming and categorization of differences as pathologies. Michel Foucault has shown how medicine came to be increasingly constituted by “the *medical bipolarity of the normal and the pathological*” in the 19th century (Foucault 1973: 35; emphasis in original). The process of normalization can be described as a “continual deployment through diffuse and diverse channels” (Adkins 1999) and works mainly through naming. Labelling and the invention of categories is one of the major means of science to conquer the world. The compulsion to categorize is symptomatic in the processes of intersexualization and all other processes of pathologization and normalization. This development of categorization went hand in hand with the establishment of medical expertise and experts. With regards to intersexualization it meant the judgment of the individual no longer mattered; rather, it was the opinion of the expert who was now authorized to evaluate, diagnose and to treat that individual. So, the production of medical knowledge about the phantasm of “intersexuality” is intrinsically connected to power. The opinion of the expert is valued over the individual’s sense of self and sense of health. Foucault provided a concept that can describe and analyze this hierarchization and the disciplining modes, which go hand in hand with the power-knowledge complex in medicine and the psy-sciences, as he calls the disciplines which are assigned to examine the mind. Bio-power is a set of several disciplinary operations which consists of and encompasses a totalizing means of the organization of subjects (Foucault 1975). The effect of the organization of subjects is caused by the new disciplinary power he identified; this power is not negative but creative. In *Discipline and Punish*, Foucault insists that “we must cease once and for all to describe the effects of power in negative terms: it ‘excludes,’ it ‘represses,’ it ‘censors,’ it ‘abstracts,’ it ‘masks,’ it ‘conceals’ (Foucault 1977a: 194). “In fact”, he argues, “power produces; it produces reality; it produces domains of objects and rituals of truth. The individual and the knowledge that may be gained of him belong to this production” (ibid.). In the case of intersexualization, this becomes abundantly clear: Intersexualized individuals are produced in the course of their medicalization and their pathologization; they are created as such.

In order to back-up their newly introduced treatment recommendation, Money et al. introduced their paper on so-called sexual incongruities and psychopathology by calling upon Freudian psychoanalysis and the accompanying powerful discourse of sexuality:

Few people acquainted with Freudianism and its impact on the theories of psychology and psychiatry can fail to be aware that sexuality, in its broadest sense, has been given an important place in theories about the genesis of psychiatric disorders. It is appropriate, therefore, to examine the evidence of human hermaphroditism in relation to psychopathology. (Money et al. 1956: 43)

It is rather astonishing how Money et al. come to the conclusion that hermaphroditism has to be interrogated in relation to psychopathology since, as demonstrated above, their sample of people does not show a significant percentage of psychopathology – what they do, however, is link their research to the issue of sexuality. Sexuality, as Foucault has shown, is the great secret/mystery and prominent explanation system of the West and is therefore prone to be employed in order to justify a research topic. Sexuality also shows a proneness to so-called pathologies – the perversions (here mainly homosexualization) that threaten the heteronormative make-up of Western societies (Foucault 1978); thus, these perversions could easily be applied to construct hermaphroditism/“intersexuality” as a problem that has to be interrogated by psycho-medical experts. To be able to intersexualize bodies, Money et al. will link the so-called biological body and the so-called cultural gender role to sexuality. Intersexualization, then, becomes only *meaningful* within the discourses that produce it. These discourses are the discovery of a true sex and the surgical and medical construction of a best sex, which is based on the discourse of heterorelational gender roles. Intersexualization is situated at the crossroads of multiple discourses and knowledge productions which are intertwined with power structures. Especially when considering their recommendations for treatment that they developed during these two years of intensive research, their study is highly questionable since they will recommend surgery in early infancy to secure a stable gender role. As stated above, most of the adult patients in their sample actually had a stable gender role despite their bodies not having been subjected to surgery as infants and despite their genital appearance being not “congruent” with their gender role.

Money and his collaborators developed the argument that surgery on infants’ genitalia was the only way to guarantee that intersexualized children would develop into functioning, non-pathological individuals with a mono-gendered psyche (a stable gender role) and a mono-and hetero-sexual body. In order to do this they had to back-up their psychological research with biological knowledge, since it was the body they targeted with their treatment recommendations. Accompanying the list of the seven variables mentioned above, they give an explanation: “chromosomal, gonadal, hormonal, and assigned sex, each of them interlinked, have all come under review as indices which may be used to predict an hermaphroditic person’s gender – *his* or *her* [original emphasis] outlook, demeanor, and orientation” (Money 1955: 258).

This quote, as I argue, shows the urgency of assigning *his* or *her* gender even though these criteria do not give a clear sign for an either so-called male or female body since as they state it *is* hermaphroditic. As the paper proceeds, they exclude two aspects from their diagnostic list as they state that: “Like gonadal sex, hormonal sex *per se* proved a most unreliable prognosticator of a person’s gender role and orientation as man or woman, boy or girl” (Money et al. 1955a: 305). One aspect of their list, however, remains as a “prognosticator” for the best sex, which is named here: “The most emphatic sign of all is, of course, the appearance of the external genital organs” (Money et al. 1957: 335). What seems astonishing is the fact that we are here in the sphere of “prediction”; there is a body that provides the physician with categorical information about its presumed tendency towards either maleness/masculinity or femaleness/femininity. The physician will then transport the information given about the biological make-up of a body to the psychologist who will then “predict” the gender for the person’s later life. And it is here that constructivist essentialism takes its route to first determine specific parts, components and fluids of a body as either male or female to then impose onto it its future desires and practices always as either exclusively masculine or feminine. Even though the true sex of the person is indeterminable in the framework of male and female sex coordinates a gender role as masculine or feminine has to be assigned. This gender role is what Money et al. will define and re-define continuously in their publications. The respective footnote to the above-mentioned list, which therefore explains their new concept of gender role, reads:

By the term, gender role, we mean all those things that a person says or does to disclose himself or herself as having the status of boy or man, girl or woman, respectively. It includes, but is not restricted to sexuality in the sense of eroticism. Gender role is appraised in relation to the following: general mannerism; deportment and demeanor; play preference and recreational interests; spontaneous topics of talk in unprompted conversation and casual comments; content of dreams, daydreams and fantasies; replies to oblique inquiries and projective tests; evidence of erotic practices and, finally, the person’s own replies to direct inquiry. (Money et al. 1955a: 302)

Gender role encompasses, therefore, everything a person thinks, does or feels. For Money et al. there is not one single move, sensation, or expression that cannot be put into one of the two categories of a masculine or feminine gender role. In their paper from 1957 Money and the Hampsons state that the signs a child has to find out if he or she is a boy or a girl “range all the way from nouns and pronouns differentiating gender to modes of behaviors, hair cut, dress and personal adornment that are differentiated according to sex” (Money et al. 1957: 335). Reading this quotation shows, I argue, how all-encompassing Money et al. constructed gender role. Money et al.’s statements about fashion accessories, a clearly seasonal and local phenomenon, show that their theory on gender role is historically situated. In their eyes a crucial factor to the expression of femininity or masculinity is based on stereotypical behavior. Gender role means two exclusive social categories; it seemingly includes strict adaptation to social requirements concerning stereotypical behavior in relation to the coordinate-system of masculinity and femininity. The stereotypical behavior that Money et al. state were highly anachronistic at their time of research, clearly at later times if not already in the 1950s.³⁷ Rogers and Walsh reason that Money et al. “are using myths as scientific data” when they refer to the strict and stereotypical distinction between the social and cultural roles and expressions of men and women (Rogers and Walsh 1982: 273). The lived experience of children and adults is not as strictly separated, neither with regards to dress codes nor leisure activities and general demeanor. Money et al.’s research testifies to a focus on a hegemonic white middle-class stereotypes which are set as the norm. Gender role as either and exclusively feminine or masculine is a contemporary construct of stereotypes; their continual reiteration and manifestation in Money’s research does not mirror real-life experiences of actual people. Since Money et al. fostered their theory of adaptability of anybody to these stereotypes disregarding their physiological make-up, they needed to promote the theory that “psychologically, sexuality is undifferentiated at birth and that it becomes differentiated as masculine or feminine in the course of the various experiences of growing up” (Money et al. 1955a: 308). Their constructivist move of inaugurating “that sexual behavior and orientation as male or female does not have an innate, instinctive basis” (ibid.) however, is not as flexible as it seems to be:

³⁷ In 2003 Myra Hird reported from a conference on gender identity which she attended, namely the Tavistock/Portman clinic conference entitled “Atypical Gender Identity Development: Therapeutic Models, Philosophical and Ethical Issues” that took place in 2000. Presentations were given by psychiatrists, psychologists and physicians working with transgendered and intersexualized people in Britain, Canada and the USA. Hird reviews most of the lectures and describes the common agreement of most of those on gender identity disorder (GID) in transgendered or intersexualized people that “normal” girls wear skirts and dresses whereas “normal” boys prefer trousers. Hird reports her astonishment about this since “all the female clinicians, including the presenters were wearing trousers. Moreover, none of the female clinicians in the small group wore nail polish or high heels and use of make-up was minimal” (Hird 2003a: 189). All of these criteria were given as expression of “normal” femininity; if these criteria were absent in girls/women these were considered as indicator for GID. Hird concludes convincingly that the female clinicians “made assessments of GID based on behaviors, roles, clothing and so on which, by their own assessment, would *render themselves* as suffering from GID” (Hird 2003a: 190). I join Hird in her astonishment and want to stress the fact that anachronistic notions are transported in the knowledge production on intersexualization even by “professionals” who, would they only look into the mirror, would find themselves disproved in their own limiting and constraining theories.

The observation that gender role is established in the course of growing up should not lead one to the hasty conclusion that gender role is easily modifiable. Quite the contrary! The evidence from examples of change or reassignment of sex in hermaphroditism, not to be presented here in detail, indicates that gender role becomes not easily established but also indelibly imprinted. Though gender imprinting begins by the first birthday, the critical period is reached by about the age of eighteen months. By the age of two and one-half years, gender role is already well established (Money et al. 1955a: 309, 10).

“Gender imprinting” is here construed as happening even before the acquisition of language, which begins around the age of one to one and a half years. Moreover, the emphasis that “gender imprinting” is irreversible invokes the impossibility to modify gender role. Gender role, in Money et al.’s opinion, since it is so all encompassing, is learning one of two specific behaviors that one practices from the very start of one’s life until death. These two sets of behaviors constructed as “opposite” are located in the “coordinate system” of a dichotomous and binary sex(ualiz)ed/gendered society. “Gender imprinting” is construed as infiltrating a person’s life in every aspect from birth to death – irreversibly and exclusively binary. The constructivist essentialism they express here is not just based on the binary organization of the sexes but also on the binary organization of the genders – here the gender roles.

The analogy of language and gender role is used to consolidate the relevance of this new concept and how it can be understood:

gender role might be likened to a native language. Once ingrained, a person’s native language may fall into disuse and be supplanted by another, but it is never entirely eradicated. So also a gender role may be changed or, resembling native bilingualism may be ambiguous, but it may also become too deeply ingrained that not even flagrant contradictions of body functioning and morphology may displace it (Money 1955: 258).

Gender role is here equated with the acquiring of a native language, which is the use of an argument for a learning theory that can be adapted to other necessary areas of human development. The theory of the imprinting of gender role, its irreversibility, durability and its indelible character is backed-up by referencing not just academic research but also by calling upon common beliefs about the nature of learning a language. The reference to language acquisition is a rhetorical strategy since it refers to other academic knowledge productions that have been “proven” in terms of an ontogenetic and necessary learning process that is irreversible and permanent (Klöppel 2008).³⁸ Inconsistently, however, Money acknowledges native bilingualism and therefore in a sense also the possibility of a change of gender role. Nevertheless, this does not lead him to also believe that more than one gender role could be ingrained, even though one can have more than one native language. His focus remains on the “deep ingraining” of gender role despite contradictions with the body functioning and morphology. These contradictions they see are exclusively related to the external genitalia and the gender role to acquire. I elaborate on this below when I analyze their discussion on women who have phallic flesh. Gender role, one is made to believe, is just as basic for the “individual” to learn, acquire, develop and stabilize as a native language – bilingualism aside.

Even though Money argues that one set of gender roles (either masculinity or femininity) might be supplanted by the other it can never be “entirely eradicated.” Interestingly, the concept of gender role is described as being so “deeply ingrained that not even flagrant contradictions of body functioning and morphology may displace it” (Money 1955: 258). The distinction between sex and gender and the assumed necessity of concordance between the two according to normative standards (mainly the appearance of genitals) and behavior, thought of as stereotypically feminine or masculine and heterosexual orientation, has been fundamentally contradicted by their sample. However, this does not keep Money et al. from pursuing their agenda of aligning two gender roles with two fictional distinct body morphologies, which are constructed as the mature mono-sexual state of the adult man and woman, as I demonstrate in the following paragraphs. Money et al. back up their argument of the necessity of two distinct gender roles based on two separate body morphologies with a selective reading of Freudian psychoanalysis

From innate bisexuality to monosexuality

The paper “An Examination of Some Basic Sexual Concepts: The Evidence of Human Hermaphroditism” begins with a link to Freud and his hypothesis of the innate bisexuality of all human beings (Money et al. 1955a). The theory that Money et al. introduce their paper with is “that instinctive masculinity and instinctive femininity are present in all members of the human species, but in differing proportions” (ibid.:

³⁸ Money also refers here to the theories by Konrad Lorenz who studied instinctive behavior of animals, namely those of wild geese. Trained as a psychologist, Lorenz became interested in evolutionary psychology and conceived the theory that processes of degeneration he recognized in birds may be at work in humans. He was a member of the NSDAP (Nationalsozialistische Deutsche Arbeiterpartei, i.e. National-Socialist German Workers Party) in Nazi Germany and worked on eugenics and degeneration, which is why his theories were deemed controversial (e.g. Schanase 2005).

301). Money et al. are especially interested in Freud's use of biological argumentation, in which he supposedly "construed his theory of innate and constitutional psychic bisexuality on the basis of embryological evidence of an hermaphroditic phase in human embryonic differentiation, and on the basis of anatomical evidence in congenital hermaphroditism itself" (ibid.). Freud indeed implies that the physiology of the human species develops from an originally bisexual morphology into a unisexual morphology, though he was cautious about implying an extension to the psychical sphere.

Freud plays with the idea that the physiology of the human species developed from an original, so-called innate bisexual morphology into a mono- or unisexual morphology. In the *Three Essays on Sexuality* (1905) he states that "an originally bisexual physical disposition has, in the course of evolution, been modified into a unisexual one, leaving behind only a few traces of the sex that has become atrophied" (Freud 1961 [1905]: 141)³⁹. He presents hermaphroditism as an originary template for sexual dimorphism in the human species (Salamon 2004). The trope that emerges here is "evolution" from a less developed stage in human development to a more evolved stage, which is the one of a "unisexual" body. Freud relied on evolutionist theories such as Lamarckian and Darwinian perspectives, and he used them to support his teleological theories of human psychosexual development. Freud's reliance on these suppositions becomes clear in his theories on bisexuality, which he described as a "continual mingling and blending" of "inherited and acquired factors" (ibid.). With this biological frame of reference, according to Steven Angelides, he "precluded the possibility of establishing the independency of psychology" from biological knowledge production (Angelides 2001: 63). The biological-evolutionist theories he relied on prohibited him from developing a psychology, which could exist by itself. It also prevented Freud from developing theories of culture and civilization which can refrain from conceptualizing an atavistic bisexual disposition as a regression to a state of primitivism as I will show in section 2 when I analyze the analogy between the primitiveness of so-called savage societies and the supposed unfinishedness of the intersexualized body. As I argue, this analogy also provided the grounds for the Freudian equation of civilization with heterosexuality. Bisexuality is always already sex(ualiz)ed/gendered and not just portending (white, civilized) masculinity and femininity but also "mature dimorphic" maleness and femaleness and their interconnection through identification and the body ego. The place of bisexuality in the Oedipus complex prefigures sex(ual)/gender difference since it is supposed to dissolve its bi-position into the mono-position while there are no other options than those the Oedipus complex can provide. Freud, however, was quite cautious with extending this hypothesis of an innate bisexuality of the embryological stage "to the mental sphere" (Freud 1961 [1905]: 141). In the same paragraph as the one quoted above, he states:

All that was required further in order to settle the question was that inversion should be regularly accompanied by the mental and somatic signs of hermaphroditism. But this expectation was disappointed. It is impossible to demonstrate so close a connection between the hypothetical psychical hermaphroditism and the established anatomical one. (Freud 1961: 8)⁴⁰

Even though this quotation mainly refers to homosexuality (inversion) as the psychic expression of hermaphroditism, this quotation can be read as contradicting Money et al.'s interpretation. Freud here ponders about the possibility that the "originally physical bisexual disposition" that has left traces in everybody might be used for the explanation of homosexuality. In Freud's reasoning this means that for the proof of the expression of homosexuality a physical hermaphroditism has to be present in every homosexual person. He states that postulating this direct correlation is tempting but impossible to demonstrate. It is important to note that Freud explicitly excluded a connection between "psychical" hermaphroditism, i.e. homosexuality and physical hermaphroditism.

However, in a footnote in the *Three Essays*, Freud talks about a mixture of biological sex/gender characters (rather than characteristics) – again very cautiously. He states here that "every individual [...] displays a mixture of the character-traits belonging to his own and to the opposite sex; and he shows a combination of activity and passivity whether or not these last character-traits tally with his biological ones" (Freud 1962: 86)⁴¹. In this paragraph Freud states that character-traits of activity and passivity are found in everybody, independently from biological character-traits. Freud, as he did with a fair amount of his work, reworked his initial cautious statements about the stance of psychoanalysis towards bisexuality and the meaning of the physical in relation to it. With regard to the concept of innate bisexuality this shift

³⁹ German original: Die Auffassung, die sich aus diesen lange bekannten anatomischen Tatsachen ergibt, ist die einer ursprünglich bisexuellen Veranlagung, die sich im Laufe der Entwicklung bis zur Monosexualität mit geringen Resten des verkümmerten Geschlechts verändert (Freud 2000 [1923] vol. V [1905]: 53).

⁴⁰ German original: „Um die Frage zu entscheiden, bedurfte es nur noch eine regelmäßigen Zusammentreffens der Inversion mit den seelischen und somatischen Zeichen des Hermaphroditismus. Allein diese nächste Erwartung schlägt fehl. So darf man sich die Beziehungen zwischen dem angenommen psychischen und dem nachweisbaren anatomischen Zwittertum nicht vorstellen“ (Freud 2000 [1905] vol v: 53).

⁴¹ German original: „Jede Einzelperson weist vielmehr eine Vermengung ihrer biologischen Geschlechtscharaktere mit biologischen Zügen des anderen Geschlechts und eine Vereinigung von Aktivität und Passivität auf, sowohl insofern diese psychischen Charakterzüge von den biologischen abhängen als auch insoweit sie unabhängig von ihnen sind“ (Freud 2000 [1905] vol v: 124).

is mirrored in a rephrasing of a sentence in the *Three Essays*. In the editions of 1905 and 1910 he stated that the oppositions of male and female, which are present in bisexuality, can often be replaced by the opposition between active and passive.⁴² In the later edition from 1924 this sentence is replaced by one in which the meaning of bisexuality is reduced to the opposition between active and passive in psychoanalysis.⁴³ In his earlier statement Freud emphasized that he does not know what these gender characteristics are supposed to be, apart from the notions of “activity” and “passivity” which he attributes to men and women, respectively. He states that these character qualities are dependent on biological factors but are also independent from them. In the later version he simply puts active and passive in the place of female and male, respectively – albeit adding that this is a reduction of psychoanalysis. He even goes so far as to say that the significance of this contrast in character traits is reduced to the contrast between activeness and passivity in psychoanalysis. Freud never saw a causal relationship between a “biological bisexuality” and masculine and feminine qualities in the character structure. In these paragraphs, activity and passivity shows in everybody independent from biological characteristics. I therefore argue that Money et al.’s interpretation of Freud’s concept of innate bisexuality is based on a misreading. Freud’s theories were based on evolutionary theories, yet his precaution with regards to the mental sphere is neglected in Money et al.’s adaptations. Freud’s insecurity concerning the equation or prolongation of embryological bisexuality into the psychic sphere is ignored. Freud’s caution regarding the conceptualization of character traits in relation to a simple binary is simplified into a rigid dichotomy of gender roles. In their reading, innate bisexuality becomes the precondition for designing gender role as exclusively binary and complementary by their reference to supposed psychological innate bisexuality. Nevertheless, Freud’s evolutionary metaphors have wide reaching consequences for the processes of intersexualization and the distinction between sex and gender, as I show in the course of this study.

To anticipate my analysis of Robert Stoller’s research in chapter 2 I align Stoller’s use of the reference to bisexuality with Money’s employment of innate bisexuality. Stoller also took on appreciatively the Freudian assertion of a primary or innate bisexuality albeit in a slightly different manner. Stoller sets the limits and definition of sex as follows:

it is rarely questioned that there are only two biologic sexes, male and female, with two resultant genders, masculine and feminine. The evidence for biological or psychologic bisexuality does not contradict this division, but only demonstrates that within the two sexes there are degrees of maleness and femaleness (*sex*) and of masculinity and femininity (*gender*). (Stoller 1968b: 29)

Therefore, Stoller also uses the category of biological and psychologic bisexuality as *the* tautological argument for the distinction between the supposedly dimorphic sexes and dichotomous genders. Deleuze and Guattari have also tackled bisexuality as a conceptual explanation of binary sexes/genders. They state that it is “no more adequate to say that each sex contains the other and must develop the opposite pole in itself. Bisexuality is no better a concept than the separateness of the sexes. It is as deplorable to miniaturize, internalize the binary machine as it is to exacerbate it” (Deleuze and Guattari 2004a: 304). Bisexuality can only be accepted if it resolves into monosexuality – and it is prone to do so. Bisexuality is by nature bifurcated and can easily be trimmed, differentiated, and dissected into two neat categories. The either/or in intersexualization is prefigured in the concept of bisexuality. As Deleuze and Guattari stress, it is the “other”, the “opposite pole” which prohibits bisexuality from being freed from monosexuality; it is the notion of dichotomous complementarity of which bisexuality cannot be deprived. Innate bisexuality is a concept that is inherently problematic since it always implies its own resolution (psychoanalytical) or its evolution (biological) into monosexuality, whether thought of as a bodily original stage of development or as a sexual orientation. As becomes clear in Stoller’s quote, and this also accounts for Money et al., bisexuality is seen as the affirmation of the naturalness, the unquestionable truth of “only two biologic sexes” and their two resultant genders of masculinity and femininity. This division cannot be contradicted, at least not by the concept of bisexuality; it can only reaffirm it.

The concept of innate bisexuality as the basic and generic stage of human development enabled researchers engaged in intersexualization to position a so-called hermaphroditic body in an evolutionary framework of physical and psycho-sexual development somewhere on a continuum. The continuum amounts to a construction of the hybrid, which combines, interlocks and makes intelligible the supposedly two pure entities at the end of the continuum and the exclusive framework of reference for any theory of psychosexual development and identity. The evocation of degrees “in-between” reifies further the two supposedly natural sex/gender poles. “In-between” is a concept that assumes two entities, whether

⁴² German original: „für welchen in der Psychoanalyse häufig der von aktiv und passiv einzusetzen ist“ (Freud 2000 [1905] vol v: 69). English translation: “A contrast, which often has to be replaced in psycho-analysis by that between activity and passivity” (Freud 1962: 26).

⁴³ German original: “dessen Bedeutung in der Psychoanalyse auf den Gegensatz von aktiv und passiv reduziert ist” (Freud 2000 [1905] vol v: 69). English translation: “a contrast whose significance is reduced in psycho-analysis to that between activity and passivity” (Freud 1962: 26).

conceptual, symbolic, semantic or material. These two entities are located on the two poles of the continuum. This system of coordinates of femaleness/femininity and maleness/masculinity is dependent on its “in-betweens”. Therefore, “in-between” could be conceptualized as the origin of meaning in the coordinates of sex and gender. In this context, meaning only appears when two come together; however, these two have to be connected by the hybrid that these entities will form when they merge on the gradual approaching on the continuum. Argued differently, hybridity can only be constructed if there is an assumed purity of the entities that are merged; moreover, it can always only be merging under a specific sign, a specific criterion that requires definition in the first place. In the bipolarity of such constructions the positions of “intersexuality” and “bisexuality” as concepts play the significant parts of the other. In their construction as the mediating principle of a particular hybrid they are used to reaffirm the dichotomous and hierarchical categories of the norm.

Michel Foucault shows that the primary knowledge productions of psychoanalysis come from the identification of so-called pathologies, meaning that specific principles are set from the beginning of the pathologization in relation to a person functioning in Western societies since the 19th century (Foucault 1978). With psychoanalysis being grounded upon the primary assumption that a functioning person is a non-pathological individual, its foundations are intrinsically connected to the organization of society and its hierarchical structures. According to Foucault, life has been subjected to a specific rule – the technology of sexuality and its secondary differentiation mechanisms that emerge from the organization of the modern nation state, its kinship systems and the normalization processes that go hand in hand with them. Foucault refers to this central point of the abnormal versus the normal with regard to the powerful discourse of sexuality and *degenerescence* (degeneration). He states that “psychoanalysis [...] is a mechanism for attaching sexuality to the system of alliance; it assumes an adversary position with respect to the theory of degenerescence; it functions as a differentiating factor in the general technology of sex” (Foucault 1978: 130).

The theory of *degenerescence* that Foucault refers to here is a central feature of the discourses about sex, gender and sexuality. These discourses are intrinsically connected to the notion of biologically defined life, which is the precondition for defining some forms of life as biologically and/or socially inferior. This rhetoric of inferiority takes on different masks; it can be discovered in the discourses on *immaturity*, *arrested development*, *non-reproduction*, *lack of coherence in identity*, and *the normal* and *abnormal*. These discourses are intertwined in intersexualization and are instrumentalized in the rationales for surgical “finishing” of a pansexual (Holmes 2000) subject into a mono-gendered and mono-sexualized individual.

Hermaphroditism/“intersexuality” could from now on be studied with the basic assumption of its supposed abnormality with regards to sex and gender. This abnormality is perceived and conceptualized as stunted evolutionary growth or “atavism”. Money et al., picking up on these biological tropes, state that the explanation the parents should be given why their predominantly physically healthy child is subjected to major surgery is that their child is unfinished in its development and they should in no case be informed that the diagnosis is hermaphroditism/“intersexuality”. The parents should be given the “concept that their child is a boy or a girl, one or the other, whose sex organs did not get completely differentiated or finished” (Money et al 1955a: 291). Furthermore, it is recommended that a few sketches be drawn about the embryological stage in which “the original hermaphroditism of all human embryos in the undifferentiated phase, and the late stage at which external genital similarity of males and females is still apparent” (ibid.). All this should be done to provide the parents with the “enlightening concept of genital unfinishedness” (ibid.). The trope of “unfinishedness” reflects the discourses of *immaturity* and *arrested development* to explain the necessity of genital surgery to the parents of the newborn. In Money’s work the trope of evolution is employed to justify surgery: “hermaphroditism means that a baby is born with a sexual anatomy improperly differentiated. The baby is, in other words, sexually unfinished” (Money and Erhardt 1972: 5). The experts will provide the surgical tools to “finish” the development of the child. With this positioning of a so-called hermaphroditic state as less developed, less evolved than unisexual bodies, so-called unisexual bodies can be constructed as having evolved out of the traces of the “opposite” sex that they once retained. Hermaphroditism/“intersexuality” or innate bisexuality is attributed to an atavistic-atrophic stage in human evolution (and the language justifies “surgical finishing”). This explanation is here tied to physical development, while the hidden agenda for Money et al. is a psychological one, which they do not reveal to the parents. In the following subsection of this chapter I map out the discursive-material preconditions for the erasure of intersexualized bodies and identities by focusing on the surgical practices of clitorrectomy, vaginoplasty and phalloplasty from Money’s era up to now.

1.2 Surgical Interventions

In recent years, a debate, triggered by feminists and human right activists, that describes Female Genital Mutilation (FGM), or female genital surgery practiced in Islamic cultures as the attempt to control women's sexuality has been fought.⁴⁴ Feminists and human rights activists often depict "female genital surgery" as a barbaric practice. It is sometimes represented as primitive, irrational, and violent and has been condemned by those foreign to customs, traditions and cultural circumstances from which this practice emerged and in which it is still practiced. Critique has recently been aired by Nancy Ehrenreich and Mark Barr, who describe these debates as obscuring "the wide variety of functions and meanings that attach to distinct female genital cutting practices" (Ehrenreich and Barr 2005: 77). It has been argued that this religiously and culturally motivated practice has been subject to processes of othering. Western accounts by feminists, even though they want to save women from this practice, are often imperialist in their judgment. These feminists can be said to ignore the violence they are exercising themselves through their generalizations and their ignorance towards the cultural and political complexities, which are inextricably bound up with this practice. Critique from the Judeo-Christian West has often simplified the issue and has colonized the discourse around it (James 1998).

One aspect of this debate that is of interest for my argument is that the genital surgeries, which are done in West hospitals, remain unnoticed and undiscussed (Holmes 2000). Most of the accounts that condemn female genital surgery ignore the fact that genital surgery is also practiced in Judeo-Christian Western societies. The reason for this ignorance could be because the Western medical establishment has represented the genital surgeries it is advocating and performing as necessary, scientific, healing, modern and "above reproach" (Ehrenreich and Barr 2005: 71). The treatment that intersexualized people experience in Western hospitals (authorized by the medical establishment) used to be called clitor(id)ectomy. Since the discussion on female genital surgery in Islamic cultures has emerged and has used the same term, it has been replaced by the euphemistic terms "clitoroplasty", "clitoral reduction" or "clitoral recession". Cheryl Chase states that "the distinction between African 'clitorectomy' and Western 'clitoroplasty' is purely political" (Hegarty and Chase 2000: 124).

It is this representation that interests me here and the underlying rationales, which are used to make this practice appear in all of the above-mentioned ways. Ehrenreich and Barr argue that a "close examination of intersex treatment protocols reveals that they are based on the same types of culture-bound understandings as those that motivate female genital cutting" (Ehrenreich and Barr 2005: 77). Ehrenreich and Barr are correct in arguing that Western medicine is not free from cultural influence, yet I do not believe that it is this simple or one-dimensional. I also disagree with their assumption that practices of genital surgeries in Western and non-Western societies are based on the same types of culture-bound understanding. Quite contrarily, I argue that Western culture is to some degree built upon the management protocols of "intersexuality" and it is debatably as crucial to these Western cultures as female genital surgery is to the cultural circumstances in which it is performed. The prescription of medical erasure of the signs of "intersexuality" based on the psychological/psychoanalytical theories considered in this section allow only two gender roles; these two gender roles are based on two presumably "normal" very distinct body morphologies representing maleness/masculinity and femaleness/femininity. With this I do not want to imply that "other" societies do not create hierarchies of importance and strict separations that are made productive for society. It is rather the silence about "intersex genital surgery" that enabled the othering discourses around "female genital surgery" and has obscured the investments of Western societies into their own violent bio-politics.

Intersexualization represents bio-politics through genital surgeries performed to align the individual to the (hetero)sexist and phallocratic organization in Western societies.⁴⁵ Nicholas Rose suggests that bio-politics has become by now the dominant regime of control of bodies "through a system of integrated scientific discourses and social mechanisms" (Rose 2001: 38). The interconnections of scientific knowledge production and societal systems of organization form the politics of biopower. Discursive and material effects are intertwined in their affects on bodies. Bodies are immersed in social relations of

⁴⁴ Among the terms, which have been used to denote this practice are: "female genital mutilation" (FGM), "female circumcision," or "female genital cutting" (FGC). I chose the term "female genital surgery" since I feel that it is the most neutral term to be used from a Western perspective. Female genital surgeries range from "Sunna" circumcision (removal of prepuce and tip of the clitoris), excision or clitoridectomy (removal of clitoris often also labia minora) to infibulation or pharaonic circumcision (excision and removal of labia majora); often only a small opening is left to permit urination and the passing of menstrual blood (Sheldon and Wilkinson 1998:266).

⁴⁵ I use the term phallocratic in line with Luce Irigaray, who, with the term phallocracy, describes a discursive and cultural order that privileges masculinity or male dominance in general, which is represented by the phallus in psychoanalytical discourse. Phallocracy also can simply be understood as the power of men over women in a patriarchal society (e.g. Irigaray 1982). With my use of the term, however, I also want to emphasize the fact, that phallocracy in the process of intersexualization also produces the notion that a woman has to be penetratable, either literally by the penis or symbolically by the phallus.

power.⁴⁶ Foucault links bio-politics to the control of society over individuals and sees this control as not “conducted only through consciousness or ideology, but also in the body and with the body. For capitalist society biopolitics is what is most important, the biological, the somatic, the corporeal” (Foucault 1994: 210). Drawing from these considerations I argue that the body – “any-body” is subjected to specific power/knowledge complexes, which normalize. This “operation theater” (Preciado 2003) is a complex system of coordinates that locate bodies in society and make them controllable and productive. I argue that not just intersexualized bodies and subjectivities but that all bodies and subjectivities in their difference and multiplicities are subjected to the “operation theater”, albeit intersexualized bodies are subjected to the cutting scalpel of this “operation theatre” as well as to the ideological, symbolical and political implications of bio-power that penetrate all bodies. Donna Haraway stated that human bodies are “topographies of power” (Haraway 1991). These bodies are organized hierarchically according to the categories of what counts as normal. In intersexualization, as I will show below, it is also body parts - organs - which are organized hierarchically. In an organism, all organs are equal, but some are more equal as Riki Wilchins and David Valentine seem to imply when they state that “genitals account for only 1 percent of the body’s surface area” but these genitals still “carry an enormous amount of cultural weight in the meaning that are attached to them” and constitute much of what individuals and society “come to understand and assume about the body’s sex and gender” (Valentine and Wilchins 1997: 215; Karkazis 2008: 147). Rosi Braidotti links the phenomenon of “swapping the totality for the parts that compose it, ignoring the fact that each part contains the whole” to the era of biopower (Braidotti 1994a: 48). This synecdoche in intersexualization, this bio-politic is most obvious in the configuration of the body as being not a whole but its parts. This is expressed in the modification of certain parts (genitals) into one or the other pole of the binary coordinates of sexed/gendered difference. This can only be made intelligible if the common sense discourse of the supposedly natural distinction of production and reproduction is called upon represented by men and women respectively.

Regarding reproduction, however, Money et al. did not consider bodies in terms of biological reproductive capacity; they rather determined the probability of reproduction according to strict fulfilment of socio-political categories – those stereotypes described above. According to Money et al. the capacity for biological reproduction does not guarantee children; in fact, other factors are involved:

Actual childbearing is distinguished from potential biological fertility and is not determined by chromosomal, hormonal, and gonadal sex alone. It is also determined by the social encounters and cultural transactions of mating and marrying, which are inextricably bound up with gender role and erotic orientation. (Money et al. 1955b: 290)

Therefore, for Money et al. an unambiguous gender role includes gender stereotypical habits and feelings, including heterosexual orientation (Money et al. 1955b: 259). A normal or proper gender role therefore turns out to be the precondition for reproduction as well as adequate psycho-social integration into a heteronormative society. In Money et al.’s 1955 to 1957 publications the idea of a gender role was developed into the key factor for psychosexual development. Psychologically “healthy” and “normal” development from now on depended upon the “inner conviction” of being either male or female (ibid.: 289). Bodily integrity and the preservation of reproductive capacity are issues that do not feature in Money et al.’s discourse and treatment recommendations. Gender assignment, according to Money et al., should be based on the subject’s future ability to become a feminine woman or a masculine man who would later marry the “opposite sex” and form a nuclear family (alternatively with adopted children if deprived of their ability to reproduce). For Money the relation of “assigned sex” to “heterosexual orientation” is fundamental for developing an “unambiguous gender role”. Being “physically healthy” (meaning being physically not harmed or “complete” as well as having reproductive abilities) was not promoted by these researchers anymore; it was rather “psychological health” they wanted to assure through medical treatment, i.e. surgery and endocrine medication. Therefore, for them

the greater medical wisdom lay in planning for a sterile man to be physically and mentally healthy, and efficient as a human being, than for a probably fertile woman to be physically well but psychologically a misfit and a failure as a woman, a wife, or a mother’. (Money et al. 1955b: 299)

“Psychological health” is reduced to being a subject that can easily be categorized by his/her environment as either woman or man. A woman who does not want to have children, does not want to marry or even prefers other women as sexual partners is regarded as a psychological failure. Money et al. drew the

⁴⁶ Rabinow and Rose state that “we can use the term ‘biopolitics’ to embrace all the specific strategies and contestations over problematizations of collective human vitality, morbidity and mortality; over the forms of knowledge, regimes of authority and practices of intervention that are desirable, legitimate and efficacious” (Rabinow and Rose 2006: 197). Thereby they imply that knowledge as well as ethical consideration about life and death, about health and sickness and their demarcations as well as treatments are bound up with political imperatives, decisions and configurations in the broadest sense.

conclusion that surgery should be undertaken not on the basis of physical necessity but on that of a potential psychological “condition” in order to prevent having psychologically misfit women as wives or mothers. The surgically modified intersexualized body was inaugurated as the foundation of the formation of stereotypical heterosexual and normative subject(ive)s in intersexualization. The presumed psychological misfit implies a possibility of psychological “non-healthiness”. The rationales for surgery on intersexualized children were therefore not drawn from a requirement for “reproductive” capacity but from a requirement for “adaptive” capacity to heteronormative culture.

In intersexualization, as I will show below, it becomes clear that it is not the gonads (anymore) which come to represent this adaptive capacity. What I call complementary heterorelationality comes to be represented by the external genitalia in “intersex treatment”. This is a paradox since the external genitalia are biologically not linked to reproduction; they are only the signifiers of a sex(ual) difference which exceeds reproduction. This excess of signification is in Foucault’s words summed up with “alliance”. “Alliance,” and therefore the discourse of sexuality, has become represented by the heterosexual nuclear family – the marriage between a woman and a man who, in an Oedipal setting, produce offspring. The organization of life into this form of alliance has become the naturalized signifier of the distinction between productive and reproductive work (the former paid, the latter unpaid labor) and the public and private divide.⁴⁷ In intersex genital surgery, the euphemism of “reconstructive surgery” is used to make the intervention plausible to the parents. As I have noted above, the trope of unfinishedness with regards to the intersexualized child’s body is called upon to convince the parents that the surgery is necessary to finish the child into either a girl or a boy. The esthetic-functional approach by Money et al. is based on their essentialization of gender role and on the developments in surgical technology, which intersexualized bodies further served to enhance.

Interestingly, the technologies of plastic surgery emerged as a war related practice, executed to repair damaged bodies and faces of soldiers. Already in WWI plastic surgery had been used in a reconstructive way, meaning that the fractured faces of soldiers were rebuilt. However, these surgeries, called plastic, cosmetic or esthetic were truly reconstructive, replacing or rebuilding an original part of the body that had been damaged in combat. Many surgeons continued their practices following the war (Haiken 1999; Gilman 1999). With regard to “intersex surgeries”, the term “reconstructive” is also used. However, as I suggest, intersex genital surgeries should be called “constructive” since the bodies were not damaged in the first place – “intersex surgeries” are truly DE-constructive since they cut and mutilate bodies to make them become something they have never been. Morgan Holmes states that intersex surgeries “are not restorations, because the diagnosis fails to determine what is lost to the intersex person” (Holmes 2008: 139). In general, as Shildrik states, cosmetic surgery is “more about constructing at the very least a conformist, if not idealized, appearance rather than about restoring or creating a particular functionality” (Shildrik 2008: 35). Kessler implies that the word “correction” not only has a “surgical connotation, but a disciplinary one as well” (Kessler 1998: 39). This disciplinary aspect is, as I argue, played out in the requirement of conformity to the heterorelational system and is the central rationale in intersexualizing genital surgeries. The period after the Second World War was characterized by the improvement of surgical technology that enabled physicians to alter so-called ambiguous bodies that, in their eyes, would not conform to either one of the two sex(ed)/gendered categories which are set as essential for the heterorelational complementarity to work. Money et al., as I demonstrated above, have already set the stage for the “normal development” of a child into one or the other gender role in the dichotomous coordinate system of sex.

Gender role (and orientation) is by them construed as exclusively “either/or”. This either/or needs the support of one specific criterion that Money et al. single out to determine a person’s gender as either feminine or masculine. They assume that “the external genitals are the sign from which parent and others take their cue in assigning a sexual status to a neonate and in rearing him thereafter, and the sign above all others, which gives a growing child assuredness of his or her gender” (Money et al. 1955a: 306). They state, however, that “nonetheless, it is possible for a hermaphrodite to establish a gender role fully concordant with assigned sex and rearing, despite a paradoxical appearance of the external genitals” (ibid.). This fact alone should have convinced them that their treatment recommendations were redundant in terms of the person’s psychological healthiness. They report that 23 among their 76 patients (in 1955) who did not have surgery lived “with a contradiction between external genital morphology and assigned sex” (ibid.). Only one of the 23 people has not “succeeded in coming to terms with his, or her anomaly” (ibid.), while the others “had a gender role and orientation wholly consistent with assigned sex and rearing” (ibid.:

⁴⁷ Eli Zaretsky (1976) has shown that this distinction between public and private is by no means as clear as has been assumed but rather that they are intertwined and need each other to be constructed. These distinctions need bodies – and identities – that take on one of these positions and tasks. Sex/gender has been the most reliable construction on which the distinction between reproductive and productive work could be established. Reproductive work – unpaid – has traditionally been assigned to women, because of their “natural” ability to give birth and nurture. Men are the productive counterpart that is construed as “naturally” competitive, just as capitalism requires. The complementarity of these two parts is therefore essential to the workings of Western societies. Already in 1884, Friedrich Engels in his *Origins of the Family* argued similarly (Engels 1975).

307). Joan Hampson also reports from her sample of people living as women that “the feminine role had become so thoroughly ingrained that not even a large erectile phallus had challenged the certainty of erotic role” (Hampson 1955: 270). Thus, these women have an erectile “phallus” and still do not consider themselves to be men. The presence of this “phallus” has not even “challenged the certainty of erotic role” (ibid.) of these women. The bodily morphology which is designated as appropriate for a woman to inhabit is clearly not given in these cases and still the women disregard the “call” of their bodies towards masculinity and remain convinced that they are women. Furthermore, it is reported that “among the 22 who lived with a contradiction between external genital morphology and assigned sex/gender, 21 had a gender role and erotic practices wholly consistent with assigned sex and rearing” (ibid: 273), which means that all these people, despite carrying an organ that Hampson classifies as an “erectile phallus”, behaved as if they didn’t – they behaved as “heterosexual women” (as defined by Hampson) and did not experience instability because of their body’s morphology. One wonders why these people were considered patients in the first place. They all seemed to be at ease with their “anomaly” that Money et al. were so eager to determine. Furthermore, it is remarkable that Hampson uses the term “phallus”, since it not just denotes the organ but also the psychoanalytical connotation of the powerful position of the carrier of the phallus in a patriarchal society. Even though the term phallus is the term that is commonly used in medical jargon (instead of the term penis) it testifies to the conceptual framework of a phallogocentric and phallogocentric practice of viewing bodies and identities. In the surgical intervention that I will describe below this not-so-hidden agenda of the symbolic division between men and women that exceeds the material division will be interrogated.

In relation to the “feminine role” and the “erectile phallus” that Hampson is talking about here, the most startling fact for Hampson is that the identification of these women with their so-called “male” organ has still produced a subjectivity that is at ease with a body morphology that should undermine feminine identification. What is threatened here is not the psychological health or subjectivity of these women but the significance of the penis – the phallus and its relationship to masculinity and all the accompanying behavior as well as the supposedly monolithic relationship between identity and the morphology of the body. I suggest that Money et al. subscribed to this monolithic relationship between the phallus and identity, even though their data proved differently. The relationship between gender role and the appearance or possession of specific organs is not necessarily as simple, limited, or binary as Money et al. argue. In fact, Hampson sums up her paper by stating that it is not just “possible for an hermaphroditic child to grow into a gender role contradictory of chromosomal, gonadal or hormonal sex” but the child “may also grow into a gender role contradicted by predominant appearance of the external genital organs” (Hampson 1955: 265). “Psychotic symptoms were conspicuous by their absence” Hampson concludes about her sample of people (ibid: 266). Therefore, the evidence of this research, I argue, is in no way adequately used but ignored, repressed, put under erasure and into a framework of recommendation for treatment, which feeds the argument for esthetic-functional genital surgery that will be pursued in the Johns Hopkins publication industry.

From the research by Hampson, outlined so far, she draws the startling conclusion that the “prompt and unequivocal decision of the sex of assignment was found beneficial, along with early reconstructive genital surgery, as required” (ibid: 273). However, she admits that “reassignment or change of sex in childhood, with or without genital surgery, was found to constitute an extreme psychologic hazard” (ibid.). And she concludes that “physically precocious children presented no untoward social problems of sexual misconduct” (ibid.). The “physically precocious” children she talks about are said not to have any social problems. What is explicitly referred to in the last sentence of the article are “social problems of sexual misconduct”, which in light of the atmosphere of the 1950s arguably implies homosexual behavior (or other “perversions”). What constitutes appropriate sexual behavior is not explained, but there is ample explanation of what guides the researchers in their decision to advocate clitorectomy in early infancy. Hampson states that “the children showed themselves capable of establishing and maintaining serviceable standards of sexual restraint and conduct” (ibid.). It can be assumed that this erotic role, the sexual restraint and conduct that is promoted here for these girls, is heterosexual and passive (penetratable) and in no case includes the use of the clitoris in any way. The clitoris becomes a dispensable organ in Hampson’s paper. “So far as it goes” Hampson states, “the evidence demonstrates that clitoral amputation in childhood or later proved detrimental neither to subsequent erotic responsiveness, nor to capacity for orgasm” (ibid.: 270). “Yet,” she admits that “many surgeons have hesitated to deprive a patient of what some authorities have declared the most significant erotic zone in the female” (ibid.). Hampson, therefore, also advocates conducting the reassignment procedure (including surgery) in early infancy, assuming that this would not cause “an extreme psychological hazard” (ibid.). What she knowingly withholds is that there is never only one surgical procedure but always several, which will continue into early and late childhood if not into adulthood (see for example Morland 2004; Karkazis 2008). The surgical procedure that Money et al. promoted concerns the genitals and most prominently the clitoris. This clitoris, in a binary framework, is either defined as a macro-clitoris or a micro-penis, according to the genetic testing. Clitoral recession, reduction or amputation became standard protocol through their

research. As I argue, a specific normalized embodiment of femininity, masculinity and therefore of heteronormativity underlies the decisions for treatment, and it is assumed, as Karkazis states “that intercourse with a surgically constructed vagina would be better than with a small penis” (Karkazis 2008: 116). Anne Fausto-Sterling takes this even further and states that in the rationales for surgery “penetration in the absence of pleasure takes precedence over pleasure in the absence of penetration” (Fausto-Sterling 1995: 131). In the following paragraph I focus on these surgical procedures and put them in their material-discursive context.

“Phallic flesh” and the erasure of the clitoris

In the “Recommendations”, Money et al. state that a girl with a larger clitoris “sooner or later, however, [...] comes to realize her oddity. It is preferable that such a child knows, from the time when she can first begin to comprehend it, that she has a clitoris like all other girls, but that it is too big, and will be made smaller surgically” (Money et al 1955b: 293,4). In the explanatory framework of Money et al. the clitoris undergoes a surgical and a discursive erasure. Money et al. state that “girls should also know, incidentally, that whereas boys have a penis, girls have a vagina – in juvenile vocabulary, a baby tunnel – as a double insurance against childish theories of surgical mutilation and maiming” (ibid.: 295). The clitoris is erased as an organ, which can give pleasure via reference to the analogy and complementarity of the penis and vagina. Furthermore, the rhetoric here defeats any argument of mutilation by calling it childish.

An organ that is removed from discourse can easily be removed surgically without consideration of leaving a child his/her healthy and perfectly pleasurable organ. Instead, through surgery the “monstrosity”, the threat to the neatly organized complementary gender roles between men and women, will be erased. Holmes states that this practice testifies to “abuses of power in which silencing and erasing pan-sexual potential are the dominant imperatives” (Holmes 2000). I argue that this pan-sexual potential which is materially erased in intersexualizing surgery has a homologue in the discursive erasure of the polymorphous perverse in the reception of Freudian psychoanalysis. In any case, Hampson’s statement reflects a privileging of vaginal orgasm over clitoral orgasm and mirrors Freudian psychoanalysis, which designates clitoral orgasm as infantile and vaginal orgasm as mature. In 1905 Freud “rediscovered” the clitoris, or rather the clitoral orgasm, actually by inventing its vaginal counterpart. He also defended the notion that the clitoris is a version of the male organ. He states that “man has only one principal sexual zone, only one sexual organ” whereas woman “has two: the vagina, the true female organ, and the clitoris, which is analogous to the male organ” (Freud 1962 [1931]: 236).⁴⁸ As a feminist, one is of course compelled to ask: why not the other way around? And as Laqueur states, the clitoris is not “self-evidently a female penis, and it is not self-evidently in opposition to the vagina” either (Laqueur 1990: 234). Freud’s era was fanatically trying to justify the social roles of women and men since the first women’s movement was just about to threaten the traditional order. According to the era’s obsession with the biological make-up of the body and its promising explanatory framework of bio-medical knowledge (predominantly based on Darwinian notions of evolution and development) radical difference was sought and vagina and penis became to be not just signifiers of sex(ual) difference but also its very foundation. Freud’s theory added to this invention of foundational sex(ual) difference when he came up with the theory that only when erotogenic receptiveness has been successfully transferred by a woman from the clitoris to the vagina she has successfully developed female maturity and achieved the purposes of her sexual activity (see also Laqueur 1990: 235).

In *Civilization and its Discontents*, Freud describes the painful process in which civilization chooses certain body parts and makes them represent so-called sexual difference, as well as the use of those parts to justify the only permitted sort of love and bodily unions and pleasure which is “heterosexual genital love” (Freud (1961 [1927])). Women become more prone to sexual sensitivity since they have two “sex/gender zones” that can give them pleasure. Man supposedly, however, has only one “sex/gender organ” which makes him more unisex(-)gendered.⁴⁹ With this thought in mind it is also easier to understand why Freud thought that women have a greater tendency towards the polymorphous perverse. Freud talks about the child and “das unkultivierte Durchschnittsweib” which is translated as the “average uncultivated woman” which implies that class and race play here a big role in suppressing the polymorphous perverse in a specific culture which is Freud’s own moralistic, bourgeois, white, 19th century Viennese culture.⁵⁰

⁴⁸ German Original: „Der Mann hat doch nur eine leitende Geschlechtszone, ein Geschlechtsorgan, während das Weib deren zwei besitzt: die eigentlich weibliche Vagina und die dem männlichen Glied analoge Klitoris“ (Freud 2000 [1931]: vol v: 277).

⁴⁹ Freud obviously did not know anything about the prostate, which can be described as a second male sexual organ. The prostate produces part of the semen and is located between the bladder and the rectum. In Western discourse this organ has not been regarded as a sexual erotogenous zone. For thousands of years the prostate is known as a male sexual organ in traditional Chinese medicine or the Tantra.

⁵⁰ The fact that Freud’s theories derive from a white, bourgeois background reflects in his theories, especially in *Totem and Taboo* and *Culture and its Discontents* and has immense implications for the racialization process in psychoanalysis. Due to limited space in this chapter I will not be able to elaborate on this but will return later to the processes of racialization in section 2.

However, as Freud states, every woman has the potential to become a prostitute and therefore polymorphous perverse – if not properly cultured into patriarchal, misogynist, heteronormative society. I read the two concepts of innate bisexuality and the polymorphously perverse as fundamentally different from each other. In the concept of innate bisexuality we find a reference to the two sexes which are the fundament for any body to come into existence; in the polymorphous perverse we only find undifferentiated possibilities of pleasures (and embodiment) which the subject learns to contain and control according to societal, and I want to add, political censure, rules and requirements.⁵¹ I want to suggest here that if Freud (and the neo-Freudians under consideration in this dissertation) had continued working with the notion of the polymorphous perverse instead of replacing it with the concept of innate bisexuality the conceptualization of identification (and object-choice) could have taken another route. However, in the course of time (towards intersexualization) the originally polymorphously perverse body and psyche and even the less radical innate bisexuality that Freud declared a disposition, become pressed into two complementary reductive forms of either penis or vagina (1961 [1905]). Laqueur makes this process very lucid: “the social thuggery that takes a polymorphous perverse infant and bullies it into a heterosexual man or woman finds an organic correlative in the body, in the opposition of the sexes and their organs” (Laqueur 1990: 240). The naturalization of heterosexual genital intercourse can only function via a denial of the clitoris in terms of pleasure for the carrier of this organ. Freud’s invention of a “dramatic sexual antithesis” (ibid.) results in a “psychologically mature” woman neglecting her clitoral pleasures and becoming a part of the “perfectly matched couple” of Western society. Freud even suggested that the abandonment of the clitoris as a locus of sexual pleasure enhances male desire. He thus again naturalizes heterosexual alliance on which he based reproduction, the family and indeed Western civilization itself (see also ibid.: 235). Laqueur describes the history of the clitoris as “a parable of culture, of how the body is forged into a shape valuable to civilization despite, not because of, itself” (ibid.: 236). Elsewhere Laqueur states that the clitoris is the organ of sexual pleasure in women and its “easy responsiveness to touch makes it difficult to domesticate for reproductive, heterosexual intercourse” (Laqueur 1989: 101). That is to say that via the clitoris it is impossible to reinsert “woman into her place in the reproductive economy” (Moore and Clarke 1995: 292). The position of the clitoris (and its responsiveness) destroys the position of women in the economic system – in terms of controllability and functionality. The clitoris has an analogy in the penis – of course always the final arbiter in terms of signification – but maybe it is exactly because of this analogy that the clitoris has to be erased.

In the late Freudian corpus of work, mainly in an *Outline of Psychoanalysis* (1961 [1940]), his earlier trust in the power of psychoanalysis is waning. Freud starts rejecting his own earlier theories of the polymorphous perversity of body morphology, desire and the flexible development of the body ego. He sacrifices his earlier claims to the growing powers of biological explanations of “the duality of the sexes”:

We are faced here by the great enigma of the biological fact of the duality of the sexes: it is an ultimate fact of our knowledge, it defies every attempt to trace it back to something else. Psychoanalysis has contributed nothing to clearing up this problem, which clearly falls wholly within the province of biology. In mental life, we only find reflections of this great antithesis. (Freud 1964 [1940]: 188)

With this statement, Freud gave Hampson (and Money) the perfect grounds to install the notion that gender is dependent on either male (penile) or female (vaginal) body morphology, and incongruence requires surgical alignment. In *The Three Essays* Freud already took care to note that after the transformation of puberty, “the erotogenic zones become subordinated to the primacy of the genital zone” (Freud 1961 [1905]: 73).⁵² With this theory, Freud laid the basis for Joan Hampson to explain the clitoral pleasures away from the “mature” woman. The prioritisation of vaginal penetration over the capacity for clitoral stimulation is mirrored in the material effects of intersexualization.

⁵¹ The concept of the polymorphous perverse as Freud introduces it is not as unproblematic as I just portrayed it. His first remark of the child being predispositioned to become polymorphously perverse and the prostitute/woman imply that it is a state of “immorality” in the sense of cultural ignorance but also, and more important for my argument, of immaturity and degeneration. However, I want to caution against a simplifying and careless use of the concept of the polymorphously perverse. In *Eros and Civilization*, Herbert Marcuse argued for the liberation of polymorphously perverse desire and argued for a myriad of ways in which perverse desire and the pleasure principle can collapse the rational ego of repressive Western capitalist institutions. A true liberation of the polymorphous perverse instincts, he argued, can lead to a transformation of so-called sexuality into erotic desire. Marcuse argued that reducing the polymorphous pleasure seeking body to either genital sex or sexuality was a mistake. In fact sexuality “constrained under genital supremacy could never achieve the full eroticization of all the bodily zones that a pregenital polymorphous sexuality offered” (Marcuse 1966: 203). However, Marcuse’s championing of the polymorphously perverse can be read as the call for a return to a sort of instinctual truth. But this move would mean positioning the polymorphous perverse in the framework of the “return of the repressed”, which is highly problematic from a Foucauldian perspective since it implies a supposedly natural sexual disposition of the human being. To favor the polymorphous perverse, understood in this way, over the phallus in order to liberate the repressed original state of human beings would install an essentialism that can only backfire.

⁵² Gayle Salamon sarcastically notes here that “the same might be said of Freud’s own theorizing, which, over time, becomes more consolidated and certain about the categories of sex and genitals” (Salamon 2004: 102).

Money and Hampson did not consider that the late Freudian theories are made redundant by the women who carry a “phallus” and still identify as women. Hampson’s initiating paper that promotes clitorectomy or clitoridectomy is only a precursor of a body of literature written during the following fifty years that will argue for amputation and other events which surgically deprive infants, children and adults of their clitoris/phallic flesh for the sake of “esthetic” genitalia and a “healthy” psychological development (Braga 2006; Gearhart et al: 1995; Hendren and Donahoe 1980). A machinery of publications that fights for the best method to amputate healthy genital flesh has been at work all through the second half of the 19th century until now. Brooding over the best way of reducing the “phallic size” of the clitoris and creating a “superior cosmetic result” John Gearhart at Johns Hopkins recommends his own method of clitoral amputation which is supposed to “preserve the neurovascular bundle in the stump” (Gearhart et al. 1995: 487). Cheryl Chase responds to this article in the *Journal of Urology* stating that she and a lot of other people who have been subjected to “clitoral recession” or “clitorectomy” are anorgasmic and that sexual function has been destroyed due to the surgeons “touch” (Chase 1996). Gearhart et al. reply that “in fact, some women who have never had surgery are anorgasmic” (Gearhart et al 1995: 487). Heino Meyer-Bahlburg, who wrote on “intersexuality” and clitorectomy in 1999, is very much in line with Gearhart when stating that “the sexual sensitivity of the clitoris or its remnants may be markedly reduced [after surgery], and some women present with anorgasmia (not in all cases may the reason be the surgery, given the prevalence of anorgasmia in non-intersex women)” (Meyer-Bahlburg 1998: 12). I suggest that denying women (if intersexualized or not) the ability to orgasm enables these researchers to contain the threat of female sexuality in general.⁵³

Up until today, the clitoris is the most under-researched part of the human body.⁵⁴ The clitoris is an organ that is considered to be responsible solely for (female) pleasure and because of this exclusive function its investment with politics is immense. I argue, in line with Valerie Traub, that the morphology of the clitoris “is not merely a matter of empirical ‘knowledge’; rather, it is constituted by, and includes traces of, desires and anxieties about the meanings, possibilities and prohibitions of female sexuality” (Traub 1999: 303). The clitoris has been as much absent from academic and public discourse as the lesbian has; yet, the construction of the clitoris as homologous to lesbian desire shows how anatomy is constructed by gender ideology and heteronormativity. Under-researched but still at the centre of attention in intersexualization and threatened by the heteronormative and sexist scalpel of pediatric surgeons, the clitoris becomes the signifier of the conjunction between the (female) body and fears of (female) (homo)sexuality. They are “joined through the imperative of repression” as “the clitoris and the ‘lesbian’ together signify women’s erotic potential for a pleasure outside of masculine control” (ibid.: 302). Reading it through a feminist lens, this line of argumentation implies that the clitoris is invested with the power of the phallus. The clitoris, being associated with phallic flesh and, therefore, phallic power, represents a challenge to the economy of sexual pleasure in a phallographic society. In a society that is organized around the symbolic organization of a binary split between bodies that carry (men) and those that are the phallus (women), phallic flesh in women, i.e. clitoral flesh, threatens this order. The blurring of these supposed anatomical boundaries makes control according to the clear-cut distinction between identities difficult. The clitoris serves, as Traub puts it “as the authorizing sign of erotic desires, practices and identities” (ibid.: 318). The clitoris, therefore, represents an authority that cannot be granted to women, neither with regards to their erotic potential as being independent from the penetrating penis nor as in regards to their independence from the phallus as the organizing principle of pleasure in general.

This clitoral herstory, as I call it, was initiated by Freud and fully completed by Joan Hampson/John Money and testifies to the complete bi-socialization (via penis vs. vagina) of the body’s pleasures, desires and practices. Freud and later Hampson reiterate the biologisms of their times which are based on an evolutionism that needs two sexes with two very distinct bodily make ups (such as organs, fluids, anatomies and psychologies) that enable heterosexual alliance of the all too obviously adapted respective parts through intercourse and subsequent (although not necessary) reproductive activities. With the assumption in mind that heterosexuality is the “natural” state of the “architecture of two incommensurable opposite sexes” (Laqueur 1990: 233). In intersexualization the clitoris has to be erased to guarantee the absence of phallic flesh in people who are supposed to acquire a gender role as women which matches her male counterpart also anatomically. Using a Lacanian notion, albeit reduced to the

⁵³ This is not just one devastating incidence of misogynistic science but emblematic of the ignorance of these researchers operating on genitals that are supposed to become “female”. Morgan Holmes parallels this logic to telling an abused child that s/he cannot complain about being abused because other children have been abused before (Holmes 2008: 62). Sara Benson asks accordingly: “what makes doctors think that the child will understand that this is a medically proscribed procedure and not sexual abuse?” (Benson 2005: 46). Various intersex activists and scholars have reported that children who are subjected to “intersex surgery” are frightened, shamed, misinformed, and injured and that they experience their treatment as a form of sexual abuse (Triea 1999; David 1995-6; Alexander 1999).

⁵⁴ Only recently Helen O’Connell, an Australian urologist, began researching the clitoris. Her research proves that typical textbook descriptions of the clitoris lack detail and are inaccurate. The clitoral anatomy cannot be conveyed in a single one-dimensional diagram because the clitoris is not a flat structure as has been commonly assumed (O’Connell et al. 1998, 2005).

notion of complementarity or sex(ual) difference in general of the ones who *have or carry* the phallus and the ones who *are* the phallus, is not just an imaginary one; rather, it is the symbolic cultural and ultimately political realm. Phallic flesh in women does not only destroy their prescribed passivity and their symbolic status as the phallus but also the heterosexual complementarity with the penis.⁵⁵

Intersexualization today

In most contemporary surgical outcome studies of intersex genital surgeries, there is a total lack of consideration of diminished sexual pleasure (e.g. Azziz et al. 1990; Azziz et al. 1986). Recently, however, a number of publications started asking for a reevaluation of the treatment paradigm, mainly arguing with the lack in long-term outcome studies (e.g. Ahmed et al 2004). Researchers admit that “to our knowledge the long-term effect on sexual function of removing this erectile tissue is unknown” (Baskin et al. 1999: 1018). Others, again, caution that “it will take many more years to prove definitely that the benefits of early operation are maintained throughout puberty” (Jong and Boehmers 1995: 832). Some researchers, however, still chart the development in surgical procedures such as Baskin et al. who state that “historically the surgical treatment of patients requiring feminizing genitoplasty has evolved from clitoral amputation to clitoral preservation” (Baskin et al. 1999: 1018). Others have stressed that “the anatomy of the clitoris is not well understood, and studies have shown that most anatomy texts are inaccurate in the size and precise location of this organ” (Crouch et al. 2004: 137). They reason that “if the clitoris is functionally normal at birth but simply enlarged, it is questionable whether surgery that irretrievably impairs function is acceptable” (ibid.: 138). They realize that women “may resent the destruction of a major part of her sexual potential” (ibid.). In 2003, Minto et al. composed a survey of 39 women who had clitor(id)ectomy during the last 40 years. They report that only 28 of the 39 were sexually active and all of them had “sexual difficulties” (Minto et al. 2003). At least there is some consideration of the negative effects which genital surgeries can have on the intersexualized person; however, the medical establishment is still predominantly advocating surgical intervention in infants (Fox and Thomson 2005).⁵⁶ In the following paragraphs I map out some discourses on vaginoplasty and phalloplasty but focus on the former as it is more frequently applied and “completes” the surgical removal or reduction of the clitoris. Clitorectomy is the common practice in “intersex surgery”, and in Money’s words: “Feminizing surgery almost always involves amputation of an enlarged clitoris” (Money 1973: 481). Yet, this is not everything, because “in addition to clitorodectomy, feminizing surgery may require vaginoplasty as well” (Money 1973: 481).

In accordance with Money’s treatment protocol most intersexualized children would be assigned female and are supposed to become feminine – assisted by the practice of clitorectomy and vaginoplasty. Kiira Triea describes Money’s gender assignment procedure which she was subjected to as his patient. Triea was already fourteen years old when she first met Money and he asked her if she “wanted to fuck someone or if [she] wanted to be fucked by someone else?” (Triea 1999: 142). It is, therefore, assumed that heterosexual (or maybe even homosexual) relationships are based on penetration with one stringently passive (penetrated) and one stringently active (penetrating) part. The criteria for the success of the surgery are still determined by “normal sexual function” or “fully satisfactory intercourse” and do not include sexual enjoyment, “but simply the woman’s ability to accommodate a penis without pain or discomfort” (Boyle et al. 2005: 582).

John Gearheart, well-known in the field and quoted in many accounts on “intersexuality”, once said: “it’s easier to make a hole than build a pole” (quoted in Holmes 2000: 101).⁵⁷ That this is not so “easy”, however, is shown by the ongoing publications that try to enhance vaginoplasty (e.g. Hensle and Reiley 1998). Moreover, the accompanying practices that are needed to keep open that “hole” that the surgeons create are immensely intrusive to the “patient’s” integrity. The practice of dilation goes hand in

⁵⁵ I use here Jacques Lacan’s theory of the phallus as a signifier sexual difference. According to Lacan, both sexes identify with the imaginary phallus which paves the way for a relationship with the symbolic phallus, though different for the men and women. The man has the symbolic phallus since “he is not without having it” but the woman does not (Lacan 1989). However, boys first need to give up the imaginary phallus by accepting their castration (in the Freudian sense) to lay claim to the symbolic phallus. The theory also includes that women’s lack of the symbolic phallus is simultaneously a kind of possession: they come to *be* the phallus. This misogynistic conceptualization of psychoanalysis has already been criticized powerfully by feminist theorists such as Judith Butler (1993, 1997, 2000), Jane Gallop (1985) and Theresa Brennan (1993). I apply it here to denote exactly this misogynistic rationale in intersexualization.

⁵⁶ Peter A. Lee, another contemporary clinician notes that “feedback from former patients generally suggests that considerable variation is preferred to surgery that will compromise sexual sensation. Hence, much greater variation should be more acceptable than previously thought” (Lee 2001: 122). Lee, however, still insists that “if genital ambiguity is severe enough to demand a decision concerning sex of rearing, surgical reconstruction must be considered” (ibid.). This case indicates that producers of knowledge in intersexualization desperately want to rescue surgery as a means of treatment.

⁵⁷ Morgan Holmes states that “Dr. John Gearhart has had this statement attributed to him in print, and I have since heard that he deeply regrets having made it. As appalling a statement as it was for him to make, it would be a mistake to think that he was either the first or only practitioner to say it, and we may be thankful that he did say it in public, because it illuminates the misogyny informing current clinical practice” (Holmes 2008: 148).

hand with the construction of a so-called neo-vagina, which mostly has to be carried out by the parents. The parents are responsible for preventing the closure of their newborn's flesh torn apart during the construction of the "neo-vagina". The dilation process is assisted by a "Hegar metal dilator of appropriate size", which

is given to the family to continue dilatation, usually daily for several weeks, and then progressively less often as postoperative induration subsides. After about 6 mo[nths] have passed, dilatation can be done infrequently (about once a month) to make certain that there is no tendency to narrowing as the child grows older. This seems a small price to pay for being able to carry out most of this reconstructive surgery at a relatively early age, before the child is aware of her abnormality. (Hendren and Donahoe 1980: 753)

Hendren and Donahoe state that "there seems little doubt that parental acceptance of these children is better when their genitalia can be made more normal at an early age" (Hendren and Donahoe 1980: 753). The fact that there are parents who decide to not carry on with the dilation process even though they were told that this would let the tissue grow together is ignored and remains largely unpublished. The great distress that must be felt by the parents, who are literally required to rape their own child daily by forcing this dilator into its body, let alone the child's psychological and emotional well-being and the potentially ruined parent-child relationship, seems of no concern to Hendren and Donahoe. They discuss a "staged approach" that requires more than one operation. These multiple operations cause, however, "a high incidence of vaginal stenosis" (a narrowing of the neo-vagina) (ibid.: 358). They are confident, nevertheless, that the "repair of this anomaly indicates that early one-stage surgical reconstruction can produce a favorable *cosmetic and functional* outcome" (ibid.: 352, my emphasis).⁵⁸ Jong and Boehmers in 1995 also write in favor of "neonatal 1-stage reconstruction" of a so-called neo-vagina because it seems to be the most feasible approach to treat these patients (Jong and Boehmers 1995: 832). During collaboration between researchers from Canada and Brazil in 2006, Braga et al. do not yet report on the long-term accomplishments but were proud to have achieved "good cosmetic results". For purposes of demonstration they included pictures of children's genitals penetrated by a dilator (Braga et al. 2006: 2199). In any other context pictures of this kind would be deemed child mutilation or child pornography and maybe even rape (for similar practice see chapter 4). These pictures can be described as pornographic if using the definition that porn creates sexual fantasies; these pictures do create the fantasy of sexual "normalcy" in the doctors.⁵⁹ This "normalcy" is based on the results of a specific esthetic and functional approach that reflects first the erasure of the phallic flesh in women and the construction of the complementary part to the penis, the neo-vagina. The "pleasing cosmetic result" of feminizing surgery is achieved when nothing is left besides a flat area (Bellinger 1993: 652). This additionally testifies to the argument by Kessler that "lookism" is the final arbiter in the treatment recommendations for "intersexuality" and the intersexualization, which are not only still in place but are constantly reinstalled by some researchers (Kessler 1998: 109). In another medical paper a side story is told, which gives insight into the importance being placed on a female assigned child having an introitus. Two children died after feminizing surgery due to pneumonia, which they are likely to have caught during their hospitalization (Braga et al. 2006). Karkazis reports a similar case in which a child was treated for heart disease *after* the genitals were operated on (Karkazis 2008). I suggest that these incidences imply that a surgically and binary sexed/gendered child is more important than the risk to life through surgery.

Long-term studies are only beginning to be conducted but no research has yet been able to determine the full impact of these surgeries, nor have any of these studies taken a fierce stance towards genital surgery in infants. Understandably, people who have undergone surgeries of such nature are not keen on further contact with the medical establishment or on providing information on their feelings and experiences. Therefore, long-term follow-up research on patients with clitoridectomies and vaginoplasties is very rarely published. Only since 1998 physicians have little by little begun publishing critical assessments of long-term outcomes of such surgeries (e.g. Berenbaum and Bailey 2003). Some of them admitted that "aggressive or repeated attempts at vaginoplasty in infancy may be counter-productive" because of extensive scarring (Alizai 1999: 1590). Furthermore, it has been considered that "dilation is more likely to be successful when undertaken regularly by a motivated young woman who decided to have the surgery than when imposed on an incomprehending child" (Alizai 1998; Ogilvy-Stuart and Brain 2004). None of them, however, have thought about why a neonate should need a so-called neo-vagina. One of the first attempts to provide a long-term study in the UK states that it is "still not explained what they mean with sexual functioning, heteronormative bias still present" (Creighton 2004: 46) and cautions that "each case must be considered individually with a clear commitment to transparency of discussion, including possible

⁵⁸ In the same paper they state that since "the introitus at this time accepted a no. 18 Hegar dilator' they consider their surgery in the child a success. In another case they write that the so-called vagina they created "is a generous size and accepts a 20-mm dilator" (Donahoe and Gustafson 1994:358). It is really appalling to read these medical texts that rather come across like two immature boys comparing their penises.

⁵⁹ I want to thank Robert Davidson for his comment on pornography and the meaning it acquires in this context.

detrimental effects upon future sexual function” (ibid.). Sarah Creighton is still one of very few physicians who consider the option of not performing genital surgery in infants.

Normative, “esthetic” anatomical parameters are still employed to determine the phallographic split between an *either* male *or* female “psychologically healthy” formation of a “mature gender identity” based on surgically constructed complementary “holes” and “poles”. Karkazis describes the surgical procedures, which I have described above, by writing that the “clitoris, overwhelmingly tied to female sexual pleasure, is reduced, whereas the vagina, more central to male sexual pleasure, is enlarged” (Karkazis 2008: 154).

A so-called micro-penis is therefore enlarged in the processes of intersexualization.⁶⁰ The guidelines for phalloplasty that Money found necessary are also still in use. In a prominent publication with Patricia Tucker from 1975, Money stated that “at the minimum extreme, an erect penis must be something over two and a half inches in length to penetrate far enough into a vagina for a man to begin to feel satisfied with what he can do for his partner” (Money and Tucker 1975: 56). Felix Conte and Melvin Grumbach, two surgeons practicing at the Department of Pediatrics, University of California, San Francisco, write no earlier than 2003 that a so called micro-penis in “apparent males” has to be bigger than 2.5 cm and that, similarly, “apparent females” should be investigated who have “clitoromegaly”, meaning tissue exceeding the size of 0.9 cm in the “full-term infant” (Conte and Grumbach 2003: 260). Others have given clear measurements of the “normal” widths and lengths of the infant’s penis (Feldman and Smith 1975). Karkazis asks here aptly: “how do you gauge the length of a small, fleshy, spongy organ to an accuracy of 0.2 centimeters?” (Karkazis 2008: 102). The rationales given for the decision for surgery are that “most boys with hypospadias are not able to urinate in the standing position until after surgery, which could keep them from entering the competition with other boys, demonstrating their prowess at urinating at certain distances” (Robertson & Walker 1975). In 1997 a Dutch research team remarks that “this could play a role in the acquisition of feelings of incompetence, inadequacy, shame, or loss of self-confidence” (Mureau et al. 1997: 372). An even more recent paper has asked whether or not the definition of “micropenis” should vary according to ethnicity which testifies to both the inherent Eurocentrism and the racializing aspects of research on the body and sexuality (Cheng and Chanoine 2001). These recent publications indicate that the biological functions of the penis are conflated with its social and symbolic ones (Karkazis 2008: 103). Intersexualization conveyed in phalloplasty materializes the phallographic organization of society in its purest form. Any possibility of embodiment for a person without a penis as male is foreclosed in this framework. It also assumed that the bodily ego is solely based on sex(ualiz)ed/gendered parameters; additionally, it ignores how surgery also produces embodiment that is arguably extremely more influential in the lives of intersexualized people (Roen 2009). Phalloplasty also requires repeated surgeries carried out in childhood. A man who has several surgeries which result in the need for life-long catheterization will have a different bodily ego than a man who does not have a catheter and who has not had repeated surgery on his penis. I argue here in line with Iain Morland who has stated that “desensitization is not an acceptable side effect of normalizing surgery, because genitalia are for touching, not for looking at” (Morland 2009: 296).

Most of the cases Money recorded were “lost to follow-up” (Kipnis and Diamond 1999: 179). Kipnis and Diamond note that thousands of sex reassignment procedures have been performed although “there have been no systematic large-scale studies done to assess the outcome of these procedures” (ibid.: 178). And since the emergence of intersex social movements, intersexualized people who now speak out almost unequivocally against the medical treatment they experienced, provide evidence that the “outcomes of the process” resulted in the most devastating effects on people who have been intersexualized (Chase 2003; Holmes 2002; Morland 2001).⁶¹

Researchers, clinicians, psychologists and surgeons consider themselves experts on the issue and devalue the voices of intersex activists who have been arguing against surgery for the last twenty years. The debate is solely conducted in the medical establishment which is ignorant of the interventions by the by now numerous intersex movements. These follow different approaches that could be described as either revolutionary or evolutionary according to their acceptance of pathologizing terminology or their resistance towards it (Davidson 2009).

This distinction between revolutionary and evolutionary discourses is epitomized by the debate about the replacement of “intersexuality” by the term Disorders of Sexual Development (DSD) in October 2005. At a conference in Chicago hosted by the Lawson Wilkins Paediatric Endocrine Society (LWPES) and the European Society for Paediatric Endocrinology (ESPE), fifty international experts in the field reviewed “intersex management” in order to formulate proposals for future studies. The published “Consensus Statement” argues that “the term Disorders of Sex Development (DSD) is proposed, as

⁶⁰ The designation of an organ as either a micro-penis or a mega-clitoris is dependent on the sex assignment; both terms denote the same organ.

⁶¹ Shame and secrecy as the most dominant feature of intersexualization have recently been tackled by intersex social movements. The Internet has played a crucial part in the development of these movements and has helped to connect people who are geographically dispersed. Intersex movements, which have developed since the middle of the 1990s, have now reached great numbers of participants and have shown a considerable growth in membership (e.g. ISNA, AISSGUK, Bodies Like Ours, OII international).

defined by congenital conditions in which development of chromosomal, gonadal or anatomical sex is atypical” (Hughes et al. 2006: 149). Therefore, the emphasis is on development and abnormality (see also Lee et al. 2006). This consensus statement, which is a consensus statement between fifty medical practitioners and two intersex activists, furthermore states that “a key point to emphasize is that the DSD child has the potential to become a well adjusted, functional member of society” (Hughes et al. 2006: 151).⁶² Therefore, the treatment protocol has not so much changed in its rationales; the main aim is to produce a functional person who is well adjusted to the organization of a heterorelational society. Under this new nomenclature the genitals of intersexulized children are still referred to as inadequate atypical, divergent or malformed which have to be surgically normalized (e.g. Lee et al. 2006). Alyson Spurgas refers to this new medical protocol that followed the change of terminology from intersex to DSD and argues that DSD has developed a new medical protocol which “positions the pre-/post-/intersex body as a haunted body that must be constantly surveilled and preemptively managed, so that the individual’s at-risk status is never realized, the ambiguity is kept in (profitable) remission, and the (hetero)normative identity remains secure” (Spurgas 2009: 114). Spurgas argues that even if surgery is terminated “this does not herald the end of the medicalization and pathologization of intersex bodies, in fact, it opens up the possibility of a new and even more encompassing intersex treadmill” (ibid.: 113). In line with Spurgas, I argue that the term DSD only reinstalls intersexuality as a disorder. Additionally, the emphasis on sexual development in this new nomenclature justifies the discourse of surgical intervention that “finishes” the “unfinished” body of the intersexualized child into one of the two monosexualities.⁶³ As I demonstrate in section two, the trope of *development* derives from sexological and evolutionary discourses and combines with analogies of racializing discourses.

However, most of the intersex movements have a much more critical stance towards surgery than most of the medical experts who create the “phenomenon”, phantasm or problem of “intersexuality” in the first place and make a living from their “experiments”, treatments and repeated surgeries. The power-knowledge complex that is produced over the bodies of intersexualized children excels in the material-discursive effects medical expert knowledge can have. Foucault has once stated that “knowledge is not made for understanding; it is made for cutting” (Foucault 1977b: 154). I suggest that the machinery of diagnosis and treatment in intersexualization evolves literally as a cutting scalpel.

An accompanying feature of Money et al.’s treatment recommendations mirrors the self-conception of the medical establishment as *the* authoritative instance: it has long been medical practice to not inform patients about their conditions. Cancer patients, for example, were, for a long time, not told that they had cancer and that they might die. The authority of this practice has only recently been exposed and criticized by patient self-help groups and their advocacy of “informed consent”. Respect for autonomy plays a central role in the debate around informed consent (Faden et al. 1986). In intersexualization respect for the medically diagnosed person is hardly found. It has become increasingly evident that cases of “intersex management” do not meet most legal standards of informed consent in the West (Ford 2001). More recently, David Hester has examined the exclusion of intersexualized people and their parents from the decision process and the devastating limitations of choice that go hand in hand with this practice (Hester 2004). He fundamentally criticizes the concept of “informed consent” in the process of intersexualization, since for him it is clear that

the implicit and fundamental purpose of diagnosis and treatment is *persuasion*, enacted through rhetorical means whereby the body of the patient becomes an object held under a hermeneutics of suspicion, *requiring* (through the assumed premises of argumentation) medical intervention as a necessary conclusion. The result is a circumstance that constrains the decisions of both parents and physicians, such that ethical agency of the patient (or the patient’s representatives), even under circumstances of “*informed consent*,” can never be granted. (Hester 2004: 23)

Clinicians and researchers are still convinced that “surgery in infancy should be aimed principally at creating the appearances of normal external female genitalia, to alleviate parental distress” (Alizai et al. 1999: 1590). This reasoning plays into Money’s treatment recommendation of surgery in the first eighteen months of life and of not informing the parents of the diagnosis that the expert has conveyed to other medical experts.

My contention is that intersexualization that goes hand in hand with the surgical body modifications – genital surgery on infants who cannot give their consent – is the basis for the constant reproduction, reiteration and enforcement of a heterosexist, misogynistic and disciplining material and discursive practice. In 1972, Money stated with Anke Ehrhardt that “nature herself supplies the basic irreducible elements of sex difference which no culture can eradicate” (Money and Ehrhardt 1972: 13).

⁶² The fifty experts came from 10 countries. The two intersex activists were Cheryl Chase from ISNA (now Accord Alliance) and Barbara Thomas of the German AIS support group, XY Frauen.

⁶³ The debate about the new nomenclature of DSD caused varying responses. For discussion see for example Dreger and Herndon 2009, Dreger et al. 2005, Davidson 2009, Feder and Karkazis 2008, Karkazis 2008, Cornwall 2009, Reis 2007.

This quote shows that Money was by no means a social constructivist – he was an essentialist constructivist who relied on the two-sex model and his means of surgery in order to reinforce what he saw as “nature”. His aim was an alteration of the body surface in a supposed concordance with two available standard and stereotypical psycho-social gender roles.

Conclusion

The most intriguing fact about the intersexualization process kicked off by Money and his collaborators in the 1950s is that no so-called psychopathologies were exhibited by the very people who ultimately, and sadly, were used to establish one of the most violent medical and psychological practices – practices based on biological essentialism, gender discrimination, phallocentrism and heteronormativity. The “problem” or “condition” Money et al. addressed was practically invented; it never had any foundation. The research they undertook pursued a phantasm they tried to prove over and over again. Money’s researching years and the influence of his work span nearly half a century and have not just been crucial in one of the most terrifying violations of human rights in the West but have also reinstalled gender stereotypes that would secure the status quo of a heteronormative and sexist society.⁶⁴

Money’s research team and subsequent researchers and physicians standing in his tradition try to find the true sex of an intersexualized child to determine the best sex in accordance with the optimum gender of rearing. This optimum gender of rearing can either be as a girl or a boy, even though the true sex of the child implies that neither of these two exclusive categories follows supposedly *naturally* from *the true sex* they determined beforehand. Just as any other newborn is assigned to one of these categories and (surgically) disciplined into one gender role or another; intersexualized children will experience the same, albeit in a much more violent way. Surgical and medical intervention has become the means by which intersexualized children are made to conform to the norms that in Money et al.’s research have become naturalized. Money et al.’s referencing of Freud’s concept of innate bisexuality has provided the grounds for the argument that the intersexualized child is unfinished in its development and therefore has to be surgically “finished” by the medical expert. The surgery is performed to enable the child to perform one of two heterorelational gender roles according to stereotypes that Money et al. use to define the limits of these gender roles. The fact that reproduction is not of central concern in this treatment recommendation and its underlying arguments but rather the external genitals shows that the dichotomous organization of sex(ual) difference exceeds its signification.

The genitals are the part upon which surgery is performed, because these parts symbolically organize bodies and identities according to the phallocratic split in society. These parts come to stand for the complete person as individuals and are arranged according to a complementarity represented by the phallus and the vagina. I have argued that this is why clitorrectomy and accompanying vaginoplasty are the surgeries that are performed in most of the cases of intersexualization. Whenever phalloplasty is performed, the question is if an organ can be built that is *big* enough to be a phallus. Furthermore, by explaining Freud’s view of the clitoris and the vagina in the framework of psychoanalysis and “mature sexuality” I demarcated the space in which Freud abandoned the polymorphous perverse in favor of civilization. This civilization is dependent on clear-cut sexes and genders that have to be aligned to conform to each other via surgical, medical and psychological intersexualizing treatment.

In the 19th century, as I have demonstrated in the introduction, Sarah Baartman, the so-called Hottentot Venus, was represented as sexually excessive because of her visible and prolonged labia (and large buttocks). Her “monstrous” female genitalia came to be regarded as the signifier for primitive and underdeveloped non-European (here African) sexuality. Even though it is the labia which feature here as the sign for animal-like and inferior stage in human development, this can easily be adapted to the representation of the clitoris. The civilized, white Euro-American woman is the perfect counterpart for the white, civilized man and therefore cannot have an organ that is pleasurable without being penetrated by the possessor of the phallus. As I will show in section 2, the trope of *development* in cross-cultural intersexualization dominates the discourse of (inter)sexualization and racialization. The development towards maturity in the adult white female here conceptualized as shifting sexual sensitivity from the clitoris to the vagina stands in as a *pars pro toto* narrative. The psycho-sexual erasure and negligence of the clitoris in favor of the vagina is the emblematic process for the material surgical removal of phallic flesh in intersexualized children who are supposed to become wives and mothers in civilized Western culture. The history of the clitoris hereby becomes a convincing part of the history of intersexualization and of sex(ual)

⁶⁴ Sarah Creighton, Julie Greenberg, Katrina Roen and Del LaGrace Volcano remark in their roundtable discussion on “Intersex Practice, Theory, and Activism” which was published in *GLQ: A Journal of Gay and Lesbian Studies* in 2009 that “the only jurisdiction in the United States to examine this issue carefully is San Francisco. San Francisco issued *A Human Rights Investigation into the Medical “Normalization” of Intersex People*, which declared that the standard medical approach violates the human rights of intersex patients” (Creighton et al. 2009: 251).

and racialized/ethnicized difference. Western cultures are based upon genital surgeries of intersexualized people that align two supposedly natural body morphologies to two gender roles upon which the functioning of the split between production and reproduction is built. Intersexualization is normalization in the name of this binary organization of society.

Disregarding the voices of intersex activists, medical experts still conform to Money's treatment recommendations and convert the non-normative into the normative, which is considered the natural. Conformity to stereotypical gender roles on the basis of dichotomously conceptualized sex is the gist of intersexualizing treatment mantras that are still in place. In that sense, Money et al. prove to be constructivist essentialists. The gender-concept with its inherent naturalization of both sex and gender justifies and naturalizes the binary organization of society on the grounds of surgically modified bodies and gender roles which are to be brought in line with the bodies to guarantee functioning masculine men and feminine women in a heterorelational culture.

2. Essentialization of Gender Identity

Introduction

This chapter continues to trace the development of the gender-concept in the historical process of intersexualization. In 1959, Robert Stoller (1925-1991), psychiatrist at the Medical School of the University of California, Los Angeles and at the UCLA Gender Identity Clinic, was trained at Stanford Medical School, CA and Columbia University, NY. Furthermore, he was trained in psychoanalysis at the University of California, Los Angeles, and joined the process of intersexualization by focusing on the development of a concept of core gender identity. In his obituary, Richard Green writes the following about Stoller in 1992: "Bob's contributions, powerful and unique, sprang from a hub molded of the bedrock of personality: gender identity. From that hub, he thrust outward, on spoke after spoke, exploring the dimensions of human sexuality" (Green 1992: 337). With this, Green provides a perfect introductory note for my analysis of Stoller's work. In my analysis, I map out his creation of the concept of (core) gender identity, for which Green praises him here. I argue that this concept experienced major shifts in Stoller's work. Starting with the concept sexual identification Stoller will continuously work towards the concept of core gender identity. During the years between 1959 and 1990 his research on intersexualized and transsexual(ized)⁶⁵ people and his view on the causes for discrepancies between sex and gender had to be revised because of the outcome of several case-studies. The basic feature of his research that remained constant is the postulation of the distinction between sex and gender. This distinction, as I have already shown in my case-study of Money, is the foundation for intersexualization. As I will show, Stoller also bases his work on a selective reading of Freudian concepts. The biological force, which he only postulated and never could prove, evokes the Freudian drive theory. I demonstrate how Stoller uses drive as a substitute for the biological force and thereby reiterates heteronormative notions of sexuality as being innate.

Esther Newton assigned to Robert Stoller a "liberal position" and argues that he works in a way that any social constructivist could live with; yet, Newton also cautions against a too quick judgment of his theories (Newton 2000: 190). With the following analysis I will support Newton's argument and demonstrate why this liberal position is not as liberal as it seems at first sight. Stoller states that masculinity or femininity "is a belief – more precisely, a dense mass of beliefs" (Stoller 1985: 11). In the following I show that this liberal, constructivist position can better be conceived of as essentialist constructivism, just as much as Money's, as I have demonstrated in the previous chapter. However, in Stoller's work, core gender identity is the tool that is used to pursue the essentialist agenda of separating sex from gender while reinstalling it as the normal binary organization of identity on either an essential biological or an essential pre-oedipal psychological level, as I show. The reasoning to consolidate this shift is inherently bound up with heteronormative notions and shows how in this theory neither gender nor sex can be thought of as independent from sexuality – that is, the categorization of desire as sexual orientation towards an object which is either sexed/gendered as "same" or as "opposite". Once Stoller's hypothesis of the biological force was disproved, he switched to a reformulation of the Oedipus complex and its position in the processes of identification. I suggest that the essentialization of the psychological concept of gender

⁶⁵ The diagnosis of transsexuality features in Stoller's work just as prominently as the diagnosis of intersexuality. However, in the distinction to transsexuality, intersexuality became naturalized by the hermaphroditic gender identity, as I will demonstrate below. This research does not intend to make any statement about transsexuality, it is only interested in the modes in which the distinction between sex and gender was developed in this particular body of work.

identity via positioning it as pre-oedipal does not just do the trick of essentializing a dichotomously organized identity, but also consolidates masculinity as the achievement of culture.

2.1 The Gender-Concept: Sex and Gender identity

The first publication by Stoller in 1959 called “The Intersexed Patient” was composed in collaboration with his colleague Alexander Rosen. In this paper, Stoller and Rosen define their use of *sex* as:

the overall state of body and mind by which the individual conforms to the masculine or feminine standards of normality in the named sex-determining factors [chromosomes, gonads, hormones, sex organs, and psychic pattern]. It is an algebraic summation of these factors in which no one factor supersedes the others. This is the sense in which the word *sex* will be used in this communication. (Stoller and Rosen 1959: 261)

Sex is here defined as a state of “body and mind” and a matter of conformity to the standards of femininity and masculinity. Sex is still conceptualized as a state of body *and* mind, biological features *and* “psychic patterns” are attributed to sex. This will change significantly in Stoller’s research, as I will show below. However, sex, in this quotation/equation is a formula that is postulated as an independent mathematical, scientific neutral fact. It is an “algebraic summation” that the “expert” can determine by adding single entities, such as organs, body fluids and “psychic patterns”.

From sexual identification to core gender identity

The standards of normality are the indicators to allocate the summation of the sex-determining factors. Yet, the simplicity of this assignment that is implied here is complicated by “the intersex patients” Stoller and Rosen focus on in this paper. They wonder: “To which sex should these patients be assigned?” (Stoller and Rosen 1959: 261). By referring to John Money et al.’s paper series and the treatment recommendations given there, they state that they do not agree with the “point of view that all intersexed patients should remain in the identification which started in childhood and persisted into adulthood” (ibid.). Stoller and Rosen state that “the essential criterion is the strength of the patient’s identification with *one sex or the other*” (ibid. my emphasis) and that the question of *sexual identification* needs to be clarified before any plan of treatment (ibid.: 265). Stoller and Rosen caution against hasty treatment prescriptions and argue for a careful assessment of *sexual identification* via psychoanalytical and psychological determination.

In an article published three years later Stoller again collaborated with Rosen but also with Harold Garfinkel, who will later be known for his ethnomethodological studies.⁶⁶ The paper was called “The psychiatric management of intersex patients” (Stoller et al. 1962). Again, they air doubts about whether the treatment recommendations by Money et al., which include surgery before the age of eighteen months, are reasonable. They mainly question the sexual adequacy of surgically altered genitalia and caution against the psychological trauma that might result from repeated surgical procedures. Later, Stoller will nevertheless argue for “intersex treatment” (1985). In his creation of gender identity Stoller will eventually build upon Money’s construction of gender role. To determine proper sex assignment, they argue that “before the core sexual identity has been established the main problem is to determine the somatic facts” (Stoller et al. 1962: 32). The “basis of these facts” is therefore a preliminary task to the determining of core sexual identity. In this paper, Stoller shifted in his conceptualization from sexual identification, which implies an active process, to the postulation of a static core sexual identity. Identity as the new concept is the invocation of a unilinear line of developments referable to the anatomical difference rather than the concept of identification, which refers to the plurality of developmental positions (Benjamin 1995). Whereas the former implies a process that can be weak or strong the latter refers to a core, which indicates an essence of a person. Even though this core still has to be established, presumably by rearing, so-called somatic facts need to be determined in order to provide some kind of precondition for this core sexual identity and to help establish it. I read this as being in line with Money’s call to biologists to determine the *true sex* (always either male or feminine) for him to predict a *best sex* that is always either feminine or masculine.

⁶⁶ Harold Garfinkel’s work was important for feminist scholars. Suzanne Kessler and Wendy McKenna described Garfinkel’s contribution as a methodological account of the nature of the social production of gender (Kessler and McKenna 1978) and as having provided an example of the ethnomethodological method that can reveal how stable, accountable, practical activities are produced by people in everyday life. However, critique has also been aired. Norman Denzin argued from a critical feminist perspective that Garfinkel’s assessment of Agnes (which Stoller also worked on as is discussed below) “has much in common with conventional interpretive sociology, in which there is a masculine preoccupation with theorizing the genesis, origins, causes, and effects of various social situations, including social problems and the types of persons and groups who have or who are those problems” (Denzin 1990: 198).

Stoller et al. state that “the somatic can be divided according to: (1) chromosomal sex, (2) gonadal sex, (3) hormonal sex, (4) external and internal genitalia, (5) secondary sex characteristics, (6) body habitus” (ibid.: 31).⁶⁷ They add that “it is beyond the scope of this communication to discuss the various techniques for arriving at a correct genetic, anatomic and endocrinologic evaluation of somatic sex status, but it need scarcely be stated that such an evaluation is essential” (ibid.). They imply that these factors can be determined by scientists who are able to discern the dimorphous make-up of the body. This body is thought of as being composed of a number of different distinct entities that determine sex. The assumption is that chromosomes, hormones and anatomy are clearly and distinguishably either male or female and that a summation of these, via the appropriate technology, can inform the psychologist/psychoanalyst to make the decision of proper “sex assignment” as either male or female.

In 1964, Stoller builds upon his work from 1959, yet revokes his concept of sexual core identity. The term core gender identity seems now more appropriate to him, because sexual identity is ambiguous, “since it may refer to one’s sexual activities or fantasies, etc.”. Core gender identity, instead, he states “is the sense of knowing to which sex one belongs, that is the awareness ‘I am a male’ or ‘I am a female’” (Stoller 1964: 220). According to Stoller the concept of core gender identity therefore carries an advantage because it “clearly refers to one’s self-image as regards belonging to a specific sex” (ibid.). Stoller explains his understanding of the term core gender identity as being produced by three components, which are the anatomy of the external genitalia, the infant-parent-relationship and a biological force (ibid.: 223). The first one is connected to the second one, since “by their ‘natural’ appearance the external genitalia serve as a sign to parents that the ascription of one sex rather than the other at birth was correct” (ibid.). Moreover, he adds to the first component that “by the production of sensation, the genitalia, primarily from external structures but in the female additionally and dimly from the vagina, contribute to a part of the primitive body ego the sense of self, and the awareness of gender” (ibid.). The second component is, as I stated above, connected to the first one, yet, in a more complex way, according to Stoller. He states that the infant-parent relationship, is “made up of the parents’ expectations of the child’s gender identity, their own gender identity, the child’s identification with both sexes, libidinal gratifications and frustrations between child and parents, and the many other psychological aspects of pre-oedipal and oedipal development” (ibid.). And finally, he states that the third component “is the postulated biological force” (ibid.).

All these factors work together to produce core gender identity in Stoller’s theory. One’s self-image as male or female is therefore based on a number of psychological factors and the external genitalia, yet also on a so-called biological force. In the following years, Stoller will work with the hypothesis of this biological force. This third component is of central interest in the following analysis. I then move to the second component, the infant-parent relationship, which Stoller sees also as crucial in core gender identity. Here, Stoller’s reference to and adjustment of some aspects of Freudian psychoanalysis to his own research is central to my analysis. I will pay attention to the first component of the external genitalia towards the end of this chapter since this factor represents a connection between Stoller, Money and the surgical treatment protocol examined in chapter 1.

From drive to heterosexuality via the biological force.

The biological force as a component of gender identity is, as Stoller states, postulated. Even though “this force has not yet been demonstrated by endocrinological and neurophysiological studies” (Stoller 1964: 224), Stoller is confident that “some day, such a force may be found to be the algebraic sum of the activities of a number of neuroanatomical centres and hierarchies of neurophysiological functions” (ibid.). This component is precarious since it is hypothesized. Even though Stoller invokes that it is located in the range of a biological explanatory framework, he uses the psychoanalytical term drive to describe the biological force. In one specific case, which Stoller reports, he finds that “*there was an overpowering drive unalterably and continuously thrusting this child towards maleness*” (ibid.: 223 emphasis in original). In this “case” the mother describes her problems with her little daughter who plays wildly, eats fast, likes her bicycle, tears her clothes and so on. Years had passed during which the mother continuously fought with her daughter over her failure to act, walk, sit, think, and feel like a feminine girl. “The great effort failed” Stoller concludes, and this was because she “was in fact a chromosomally normal male with a fully erectile tiny penis” (ibid.: 222). After being told that she is actually a boy, she acted as if “she were being told something of which she was dimly aware and had no doubt” (ibid.) After putting on male clothing, s_he

has close friends among boys who have no doubt that he is a boy and about whose own masculinity no doubts have been raised. He goes on dates with girls; he is attractive to girls; he is attracted to girls; he has no difficulty in getting dates; he is capable of intense sexual feelings towards girls; he has orgasms with ejaculation either from wet dreams or genital masturbation, in both of which his sexual objects are females (as they were before he was told he was a boy). (Stoller 1964: 222)

⁶⁷ This list of characteristics is very similar to the one Money proposed in 1955(a). However, Stoller added “body habitus”.

This boy that the girl has become, according to Stoller is even so “normal” that he does not have any problems getting dates and orgasms; implied is here what a proper heterosexual, masculine man should be like. The child, who was formerly a failure as a girl, is described now as being a proper boy, as if he had never been anything else. The list of things that prove that he is now a proper boy is restricted to his sexual activity and his sexual feeling towards girls, who are his only sexual objects. He is also attracted by and attractive to girls, which Stoller thinks important, probably because this further affirms his masculinity. Moreover, the description about his sexual activity is consolidated by masturbation, ejaculation and wet dreams. For Stoller these are exclusively male or masculine. The attribution of all these factors to the innate, natural, essential and biological male biological force becomes clear again when he pathologizes lesbian desire embodied by the “butch” in the same paper. Stoller reports that the “calm, sure masculinity of the child [which] shows itself in glaring contrast to the ‘butch’” (ibid.: 224). This statement exposes Stoller’s homophobia: the “butch” is an insult to “real” “biological-force-induced” masculinity. The claim to masculinity is only valid if confirmed by the supposed presence of the biological force. The child, who formerly lived as a girl, was a failure because she did not behave in a feminine manner. Now that the child has been assigned the category of a boy, every aspect of behavior can be interpreted as heterosexual and masculine. The boy’s behavior, now interpreted as being caused by the presumed biological force that has always led him to desire girls and therefore caused his sexual orientation, can now be called “normal” because he “really” is and always has been a boy. The postulated biological force only had to be interpreted properly; the pathologization of the girl can be annihilated. The child, having been an abnormal girl can now be a normal boy, mainly established on the grounds of sexual orientation. Stoller states, that

although he would seem to fit into the category of those rare people who have no difficulty in shifting their gender identity from one sex to the other, this of course is not so. He never did shift his identity. He always felt (though not consciously) that he was a male. He did not shift from female to male, but only had the rights of maleness confirmed by society. (Stoller 1964: 223)

As already stated above, Stoller defines the term of core gender identity to mean an “unalterable sense” of being either male or female. Hereby, gender identity not only is essentialized and naturalized but also masculinity and femininity are positioned as the only feasible (and “promising”) possibilities for the development of identity. What happens analogically in this paper is the pathologization of transsexuals who, according to Stoller, “caricature male or female behaviour or attitudes” (ibid.). However, this does not occur in his sample of intersexualized patients, as these “had the capacity to behave as we ordinarily expect a masculine man or a feminine woman to behave” (ibid.: 221). With regard to his intersexualized patients Stoller sees a great difference, since transsexuals “shift” their identity from one to the other, which intersexualized people do not do because they have always already had the “proper” biological idea of themselves. The person who follows this innate biological force that Stoller implicates is rehabilitated from the pathological. All others who cannot evoke this picture of a biological force in their foetal state are “unnaturally” contradicting the biological forces of male masculinity and female femininity. The postulated biological force becomes the most essential arbiter of stereotypical gender behavior. The creation of core gender identity is based on mythical masculine and feminine substances which infiltrate the brain before the child is even born into the society of binary genders. In this paper, the term drive is used interchangeably with the biological force. Stoller explains that Freud did not have the appropriate technology to gain insight into this drive, but he himself reopens the issue to testify to the existence of such a drive. Even though Stoller himself has no biological data to rely on, since the biological force as he admitted earlier in the paper “has not yet been demonstrated,” it will become the “core” of Stoller’s subsequent publications.

Stoller does not explain his use of drive; however, his use of drive in this paper does imply but not reflect the use of *Trieb* by Freud, who introduced the sexual drive (or libido) in the *Three Essays* (1905) as the main concept of the theory of neuroses. Freud defined the sexual drive as the expression of a sexual constitution of innate sexual tendencies. Drive for Freud came to be (this concept also underwent crucial changes) biologically fundamental and a biological urge (*Drang*) caused by the inner organs. However, Freud, even though conceptualizing drive (*Trieb*) as biological and innate, described it as relating to the libido and sexual excitement and not to an inner sense of being male or female as Stoller applies it.

Therefore, Stoller implicitly, with the merging of the concept of drive (*Trieb*) and his supposed biological force, amalgamates libido (to remain in psychoanalytical terminology) and core gender identity. This move seems contradictory to his reason for abandoning the term sexual identification in favor of gender identity, since through the use of drive sexuality reenters the field. I suggest that this represents the impossibility of separating sex from gender without implying sexuality (or sexual orientation) within the heteronormative framework of Stoller’s work. Consequently, as I argue, Stoller’s theories of core gender identity are intrinsically tied to a heteronormative bias according to which this assumed biological force or drive has to be discerned. Jean Laplanche questions if it is necessary to preserve the term and the notion at

all in relation to the drive (the Freudian Trieb). Laplanche states: “by all means, if we do preserve it, we have to strip it of all links with the biological field” (Laplanche 1994: 139, my translation). According to Laplanche, the sexual drive is stripped off of any biological or innate connotation and always proceeds from a “root-object” (*objet-source*) and from a primary seduction context (ibid.: 141–5, my translation). Drive for Laplanche is not linked to biology but is triggered by external factors which have to be attributed to the experiences of the subject with its environment. Furthermore, it is solely linked to libido, i.e. desire, and not related to one’s sense of gender.

I suggest that Stoller, in his conceptualization of core gender identity as innate (using Freud’s drive theory and the hypothesized biological force), naturalizes gender identity in terms of feeling to belong to one or the other “natural sex category” that desires the “opposite natural sex category”. Sexual dimorphism implied by the biological force, which thrusts a child towards heterosexual masculinity or femininity, advances as a basic distinction. It is conceptualized as producing dichotomous psychological identification and social subject(ive)ities as well as heterosexual desire. By using the word drive Stoller introduces the notion of libido as the underlying biological force that makes one feel male or female because of one’s desire for the “opposite sex”. Simultaneously, so-called “same sex desires” are pathologized. Moreover, the complementarity of the two sexes is solidified by a naturalized desire towards the “opposite sex”. In that sense, I suggest, gender identity is not an independent psychological term but the image, prolongation or extension of sex into the psychological realm. This extension of sex into gender works via the desired “opposite sex” and thereby establishes “same sex” as the “natural” counterpart. The presumably psychological term of gender identity is referred back to the biological somatic sex, thought of as the summation of biological characteristics that determine one sex or the other. Female and male become exclusive categories for existing as a person. Identity, therefore, happens to be exclusively imaginable through clearly distinguished “feelings” of being either male or female because one is attracted to the “other sex” caused by a mysterious biological force.

The “natural experiment” that supposedly proves his theory of the three factors, Stoller asserts, is represented by intersexualized persons. Intersexualization occurs when this supposedly natural coherence between the three factors of the external genitalia, the infant-parent-relationship and the biological force is interrupted (any absence or discordance distorts the process of “normal” development). In addition, Stoller’s third factor, which is assumed to be biological, is capable of overriding the other two social factors (therefore stronger and essential – the very truth of personified maleness and femaleness). That is why he has to differentiate between normal and abnormal in the first place. The mechanism that can be detected here is that the “natural experiment” which is per definition natural, is deemed abnormal and thus used to affirm the norm. The interesting feature here is that the norm is defined by “natural forces” which are “innate”. It is a common feature for normalization processes to work their way through what is supposedly natural, to *find a hierarchy of normality in nature*. The “normal” is not just dependent on the establishment of the “abnormal”, but the “normal” can only emerge as such if the “abnormal” is defined. With regard to Stoller this phenomenon reads as follows:

In the normal, the three work together in the same direction to produce an intact core gender identity, a fundamental awareness of being male in males and of being female in females. In anatomically intersexed patients where one or both of the observable components is absent, the effects of the silent biological force are occasionally uncovered and then can be seen. (Stoller 1964: 225)

Three normal factors are postulated here, all of which need to be congruent to produce the normal. The abnormal can only be discerned if the “natural experiment” makes itself visible and thrusts its way through to the surface. The silent biological force could theoretically raise males to be more feminine and females to be more masculine but this is not the case in Stoller’s definition of the normal.

The second case Stoller refers to in this article is that of Agnes, whose story is used to feed the foetal “biological force” argument. Agnes was raised as a boy but at seventeen s_he “developed *all* the secondary sex characteristics of a girl” (Stoller 1964: 225 emphasis in original). Furthermore, Stoller reports that “pathological examination of the testes [after surgical removal] revealed them to be the source of large amounts of oestrogen produced since puberty when the feminine appearance developed” (ibid.). And Stoller sees his biological force proved for the second time, since in this case the “core gender identity was female, despite the fact that the child was an apparently normal-appearing boy and was also genetically male” (ibid.). This case will gain greater significance in the course of this argument since Agnes, in fact, started taking hormones (oestrogens) at the onset of puberty and hence was not subjected to a supposed foetal biological force. However, this was only later revealed to Stoller – causing him not to fundamentally question his postulation of the biological force based on this one case but rather making him add a new dimension to so-called core gender identity – the pathological pre-oedipal *trias* with the tomboyish mother who cannot let go of her son so that he can become properly masculine. I analyze this aspect, attributed by Stoller to the infant-parent relationship, in the following paragraphs. First, however, I want to map out

Stoller's stance towards the concept of gender role, since it will also be part of Stoller's reworking of the Oedipus complex.

2.2 Rewriting the Gender-Concept

One year later, in 1965, Stoller publishes "Passing and the Continuum of Gender Identity" motivated by his research. He introduces his paper with the general statement that "the term 'gender' connotes psychological aspects of behaviour related to masculinity and femininity. It does not have the same meaning as 'sex'" (Stoller 1965: 197). Again, sex remains unexplained. The main task that Stoller pursues in this paper is to distinguish gender role, which is Money's coinage, from gender identity, which is his own creation. Gender role according to Stoller is a purely culturally determined role and can shift, while gender identity remains constant. Stoller concludes: "one plays a role, but possesses an identity" (ibid.: 198). He argues, in contradiction with Money, that gender role can shift. Gender identity is the psychological feature in Stoller's theory, which represents the psychological essence of the individual. Gender role, being predominantly infused by factors deriving from the social and cultural environment, as defined by Money, does not have an origin in the person's prenatal life. Since Stoller is in search of a force that infiltrates before one enters the world, gender role is deemed less essential to becoming a male/masculine or female/feminine subject than the concept of core gender identity. Stoller's interest in finding the cause for "natural" masculinity and femininity therefore has to be based on sex – that is, maleness and femaleness in terms of a biological explanatory framework as demonstrated above.

Yet, Stoller needs the concept of gender role in his interrogation of the infant-parent relationship, which is the second component that can go wrong in the configuration of core gender identity. It is the flaws in the gender role of the mother, which Stoller will make responsible for the child's failure to develop according to his birth-assigned gender as a boy. The mother's failure to be a proper woman and let her boy-child resolve the oedipal conflict as prescribed by Freud will become the central *aporia* in Stoller's theory.

Before I look into this essentialization of the oedipal *trias*, I provide some insight into Stoller's mode of conducting research. Stoller was conscious of the problem of identity and problematizes the concept of gender identity in his publication *Sex and Gender: On the Development of Masculinity and Femininity* from 1968, which would be crucial for feminism (Stoller 1968b). He states here that

as regards the word identity, my treatment of that word will not be more adequate as to the purpose of this work is not to arrive at a comprehensive or even useful definition of the term *identity*, or to enter into the controversies now very much in the forefront of psychoanalytic theorizing as to the differences and similarities, usefulness of distortions of such terms as *ego*, *self*, *self-representations*, *identity*, *sense of identity* and the like. (Stoller 1968b: x)

Stoller adds a footnote in which he states that one of his colleagues reviewed the literature about the term identity and has concluded that it "has little use other than as fancy dress in which to disguise vagueness, ambiguity, tautologies, lack of clinical data, and poverty of explanation" (Stoller 1968b: x). Stoller therefore, questions the basis of his work fundamentally. The concept of identity, as well as the terms *ego*, *self*, *self-representations*, *sense of identity* etc. do not receive a definition or even a demarcation. He admits that "it is a working term" (ibid.). The concept of identity remains an empty signifier in his work. However, one thing he seems certain about is that "though it deals with another realm of feeling, thoughts, and behavior than that encompassed by, say, *sexual activity*, the two terms are contiguous and at times inextricably intermingled" (ibid.: vi). Identity as a concept is in Stoller's terms not to be delineated from other psychoanalytical concepts, but he is convinced that it is adjacent to and blended with sexual activity. Identity is intrinsically bound up with sexual activity in Stoller's perception. The vagueness with which he treats his central working term is even extended to the concept of gender. Stoller continues that "with gender difficult to define and identity still a challenge to theoreticians, we need hardly insist on the holiness of the term gender identity" (ibid.: vi). Surprisingly, Stoller continues in *Sex and Gender* to work with these undefined terms and bases his complete work on them. He does not refrain from using his concept of gender identity and ignores his own advice as he proceeds to develop the concept core gender identity (Chanter 1995: 40) that is caused by the equally undefined concept of the biological force. Stoller suggests that

biological forces can powerfully influence gender identity in rare cases. Granting these rare exceptions, my operating principle (to be discarded only if data are uncovered to disprove it) is that postnatal psychological forces play the most powerful and obvious part in creating gender identity, with genetically controlled biological forces silently augmenting this process. (Stoller 1968b: 23)

Biological forces, since they were disproved by Stoller's central case of Agnes, now influence gender identity "only in rare cases" (ibid.). Stoller shifted his focus to "postnatal psychological forces" which are now said to play the most powerful part in the creation of gender identity. However, the mystical biological forces still prevail as a central feature of the creation of gender identity. Additionally, they become genetically controlled according to new knowledge productions of this time about chromosomes. Stoller states that by a biological force he means "energy from biological sources (such as endocrine or CNS systems), which influences gender identity formation and behavior" (ibid.: 65, 6).

Even though questioning his own category of gender identity, he continues to use it as a working term on which he builds his complete theory. I would even say that his work is solely based on this category even though he slightly reworks it in favor of a more psychoanalytically grounded theory elaborately introduced in a 1985 publication.

In the following years between 1968 and 1985 Stoller in fact manages to attribute the postnatal forces to a pre-oedipal stage. During these years, Stoller continuously works towards intersexualization and transsexualization, both of which are processes that are based on the distinction between sex and gender. As I have demonstrated and will continue to argue, both categories are based on conceptualizations that are rather shaky and in Stoller's own words are postulated and difficult to define. Their most prominent feature is their distinction from each other and their dichotomous and complementary organization via sexual activity or orientation in Stoller's work.

Revisiting the biological force

In addition to *Sex and Gender*, Stoller published "A Further Contribution to the Study of Gender Identity" in the *International Journal of Psycho-Analysis* in 1968 (Stoller 1986a). Revisiting the Agnes case,⁶⁸ he explains how Agnes confessed to him that "she had not become feminized as the result of oestrogens produced in her testes but had rather been taking oestrogens since puberty" (Stoller 1968a: 365). "Thus", Stoller has to admit, "she could not have been feminized as a result of a 'biological force'" as he had wrongly reported, "nor could the development of her secondary sex characteristics be taken as evidence of a biological force that, starting from early childhood on, had so influenced the development of her gender identity that she had felt herself to be really a female" (ibid.). Agnes, so Stoller reports, was instead a male transsexual, "a biologically normal male, who nonetheless feels himself to be a female" (ibid.: 366). Stoller refers to his paper from 1964 and states that,

the developing gender identity in the normal, can be overwhelmed by post-natal psychological experiences in certain abnormal people, but on the other hand in rare cases may be so strong that even in the face of the child being reared in the wrong sex, it may overpower the effects of such rearing. (Stoller 1968a: 336)

Nevertheless, Stoller does not see his case being disproved but gives a footnote that states: "This patient's case does not disprove such a theory; by now, six biologically intersexed patients have been seen who, while they cannot be discussed now, seem to exemplify the presence of such a biological force" (ibid.: 366). Stoller now re-defines Agnes as a "transsexual" whereas before he knew that she induced her outer appearance by the intake of oestrogens he defined her as "intersex". Agnes cannot be an "intersex" person anymore, in his reasoning, since it was not her body, with which the pre-natal biological force called her towards femininity, but it was a self-induced hormonal change in the body appearance. It is now the behavior of Agnes that Stoller sees in need of explanation, albeit not through the biological force anymore but through a psychoanalytical framework. As becomes clear here, intersexualization is intrinsically connected to transsexualization. Both processes are based on the gender-concept, that is, the distinction of sex and gender. Whereas for Stoller "intersexuality" is biologically induced, "transsexuality" is a psychological pathology, which is produced by the failure of the oedipal conflict. In the following paragraphs I focus on his pathologization of "transsexuality" i.e. transsexualization, which he interconnects with intersexualization on the level of the pre-oedipal through the distinction between sex and gender. I argue that Stoller, in his quest to rehabilitate his hypothesis of the essential feature of binary sex, the postulated biological force that was disproved by Agnes, turns to the psychoanalytical concept of the Oedipus complex in order to induce an equally essential feature in the psyche.

Since the publication of *The Interpretation of Dreams* in 1896 the Oedipus complex is to be found in nearly all of Freud's theories as the unquestioned basis of culture. The Oedipus complex is foundational for the theories in *Totem and Taboo* (1931), *Culture and its Discontents* (1927), the *Three Essays on Sexuality* (1905) and the concept of the unconscious, as well as the distinction between the ego and the id and the

⁶⁸ The "Agnes case" is described in Harold Garfinkel's ground-breaking text, *Studies in Ethnomethodology* (1967) in full length. Garfinkel worked on this case with Stoller at the Department of Psychiatry of the University of California, Los Angeles (UCLA). Garfinkel's account of Agnes has been accorded the status of a sociological "classic" (Denzin 1990, 1991).

place of the phallus.⁶⁹ Freud's theory of psychosexual development is separated into the oral (0-1 years), anal (1-2 years), phallic (between 3-6 years), latency (childhood) and genital (puberty) stage. These stages, as Freud identified them, are non-negotiable: everybody has to go through them. Yet, during his research Freud frequently changed the timeframes in which these stages take place. He acknowledged that development varies between individuals and that different stages can even exist simultaneously within a given individual. In the phallic stage the passing of the Oedipus complex or the resolution of the oedipal conflict takes place. The Oedipus complex is derived from the myth of *Oedipus Rex*, who married his mother and killed his father (albeit unknowingly). Freud uses the myth to describe how the (male) child desires his mother and develops anger towards his father, since the father is the one who can have the mother. The threat the father poses to the child produces castration anxiety in the boy. The language often used to describe this and to universalize it is the one of "opposite" and "same" sex parents who are desired or envied (hated). C.G. Jung has used the term *Elektra complex* to describe the process female children go through.⁷⁰ Freud, however, called it "feminine Oedipus attitude". Even though Freud could never sufficiently explain psychosexual development in girls he described the phallic stage through the clitoris, the "penis-equivalent", in which girls experience penis-envy and finally accept that they cannot have a penis. For women he defined an extra stage in which they transfer the importance and sensitivity of the clitoris to the vagina (see also chapter 1). The resolution of the Oedipus complex occurs by identification with the parent of the "same sex" and by the repression of the sexual interest in the parent of the "opposite sex". It is here where the male child learns to identify with the "same sex" and to shift the desire for the mother to other representatives of the "opposite sex".⁷¹ For girls this means that they have to learn to identify with the formerly loved object of the mother and have to shift their desire to the father. Freud, however, acknowledged that the Oedipus complex process is not as smooth as that, and hence introduces bisexuality as a complicating factor in the Oedipus complex. Bisexuality becomes a fundamental concept in the Oedipus complex because it can describe desire as well as identification. Freud introduced the notion of bisexuality as an orientation of desire in relation to the oedipal conflict and called it the negative Oedipus complex:

Bisexuality [is] originally present in children: that is to say, a boy has not merely an ambivalent attitude towards his father and an affectionate object-choice towards his mother, but at the same time he also behaves like a girl and displays an affectionate feminine attitude to his father and a corresponding jealousy and hostility towards his mother. It is this complicating element introduced by bisexuality that makes it so difficult to obtain a clear view of the facts in connection with the earliest object-choices and identification, and still more difficult to describe them intelligibly. (Freud 1961 [1925]: 33)

Freud's ambivalence and caution towards his own concepts and theories is apparent. Freud states that bisexuality plays a role in identification *and* object-choice and thereby opens the space of the Oedipus complex for a much more flexible theory of identification in relation to desire. He admits that he never gained a "clear view" of the workings of bisexuality. Judith Butler explains that bisexuality features here because Freud could not provide a place for homosexuality in the healthy development of the child. Judith Butler therefore claims that "bisexuality is the coincidence of two heterosexual desires within a single psyche" (Butler 1990: 77). Steven Angelides sums this up as "to identify is to repress bisexual desire, and to desire it is to repress bisexual identity; yet to identify and to desire is to be predisposed bisexually" (Angelides 2001: 63). It is this distinction between "same sex" and "opposite sex" which makes a non-heteronormative interpretation of Freud difficult. This distinction presupposes that the child internalizes either a masculine or feminine subject position which happens via a heterosexual desire for the "opposite sex" parent. The child then identifies with the other, the "same sex" parent by converting the desire it felt before. The resolution of the oedipal conflict went wrong if the (male) child did not give up the mother in order to identify with the father. Therefore, remaining in the logic of the Oedipus complex, Freud had to

⁶⁹Since then there have been numerous attempts to question the assumed universality of the Oedipus complex. Judith Butler has shown with *Antigone*, Oedipus' sister: if Freud had chosen another myth to identify the workings of our culture then we would have a different psyche (Butler 2000). Her theory is that the gods cursed Oedipus and his children, and psychoanalysis curses gender (Butler 2000). Other theorists have engaged from a different angle with Freud's universal theory, stating that it is the work of mourning (his father's death) and that if Freud had stuck with his earlier findings he would have had to consider not only the Oedipus part of the myth but also other parts such as *Laius*' (Oedipus' father's) fault (Balmory 1979) or his mother and wife *Iocasta* (Silverman 1988). Also, he has focused on exclusively one version of the myth and not the others, which is problematic since according to Claude Lévi-Strauss "all versions belong to the myth and should be considered" (Lévi-Strauss 1963: 206-31).

⁷⁰ *Elektra* is also a mythical figure. She was the daughter of Agamemnon and Clytemnestra and helped her brother Orestes to kill her mother.

⁷¹ Freud's contribution to the understanding of patriarchal culture is by now acknowledged by most feminist scholars and his theories are sometimes even regarded as subversive, because he described what patriarchy demands of women and femininity and thereby does not argue with biology (e.g. Mitchell 1974). Among some psychoanalysis is, therefore, regarded as a powerful tool to dismantle ideological/social differences between the sexes/genders. However, a number of feminists have argued that Freud's emphasis on white male development and his disregard of or inability to sufficiently describe female sexuality and development affirms patriarchal structures and therefore phallogocentrism (e.g. Irigaray 1981).

explain homosexuality as a neurosis. The Oedipus complex is, therefore, intrinsically heteronormative and cannot account for anything outside this complementary economy of the nuclear family. Stoller uncritically takes on Freud heteronormative bias and neglects the workings of the negative Oedipus complex.

In reference to the Oedipus complex, but reifying it on the basis of the parent-infant relationship and the failure of the mother to let the son separate from her body, Stoller gives four reasons for the Agnes case. In most of his research, Stoller focused on boys and developed his theories without paying attention to girls. If Stoller had interrogated the development of girls, his theories would probably have taken a different route. First, the mother of Agnes is tomboyish and bisexual in Stoller's terms, meaning that she is not properly feminine (wearing suits instead of dresses etc). Second, the father is a passive man, himself effeminate and "literally almost completely physically absent from their families" (Stoller 1968a: 96). Third, both parents would permit the child's effeminacy to develop. And, fourth, the mother would have "astonishingly excessive physical contact" resulting in the child "acting in a feminine manner and showing his desire to be a female" (ibid.: 366). Stoller concludes his study on "transsexuality" by stating that "overwhelmingly feminized boys" had mothers with the "same expression of 'bisexuality' that prevented their infant sons from separating from their bodies" (ibid.). So it follows, according to Stoller, that the mother's tomboyish "bisexuality" and her penis envy caused the transsexualism in the boy. Transsexualism is construed as a psychological phenomenon that is caused by the mother's (and the father's) maladjustment to the formerly naturalized gender identity and gender role. In his reasoning the parents are maladjusted to their gender roles and insecure in their gender identities and, therefore, not able to provide a properly heterosexual oedipal setting for their child. Stoller concludes that keeping these boys from resolving the oedipal conflict caused their transsexuality. Stoller reasons that "the essential psychodynamic process seemed to be excessive identification with their mothers, caused by the inability of these mothers to permit their sons to separate from their mother's bodies" (ibid.: 97). Stoller relates this to the Freudian theory of oedipal development and opposes the assumption that castration anxiety is responsible for the boys "pathological" development towards femininity. He states that,

it is hard to believe that this femininity, which is observable in these children long before the classically described phallic phase - in one case by age one - is the result of the kinds of castration fears that are known to be fully developed only years later. Also, it seems very unlikely that the blissful state of closeness that such a mother produces can cause the boy so much fear of his penis being cut off that he pleads to have it cut off, and that he can preserve his sense of maleness by becoming a female. (Stoller 1968b: 101)

Accordingly, Stoller engages in the discussion of transsexuality (in male children) in relation to Freud's theory of the phallic phase (the stage of oedipal resolution) only to later refute it again in order to establish core gender identity as being present even before the phallic phase sets in. He states that "by the time of the phallic stage, an unalterable sense of gender identity - a core gender identity ('I am a male'; 'I am a female') has already been established in the normal person" (Stoller 1964: 223). Core gender identity is now associated with the categories of male and female. Gender identity is that which denotes masculinity or femininity. Stoller bases his theory of the pre-oedipal establishment of core gender identity on the case of a child whose "cross-dressing began a day or so after he first walked, at which time he put on his mother's shoes and with great skill maneuvered around the house as though he had been accustomed to walking in high-heeled shoes" (Stoller 1968b: 94).

In contrast to Freud's conviction that the primary identification is masculine, Stoller believes that all children begin with a female core gender identity obtained from the maternal symbiosis. Therefore, core gender identity results non-conflictually through identification with the mother. Failure to interrupt the maternal symbiosis pre-oedipally may in boys result in permanent gender identity "disorders" such as "transsexualism". So-called normal development facilitates the boy's shift to a male core gender identity and to obtain a masculine gender identity.

Seventeen years later Stoller proceeds from the assumption that in "the rare case, despite biologically normal genitals and proper sex assignment, core gender identity can still be influenced by such subliminal or unconscious communications from mother to infant" (Stoller 1985: 13). This relationship is expressed by the circumstance that "as an infant, such a boy [feminine i.e. 'primary transsexual'] usually has an excessively, blissful, skin-to-skin closeness with his mother" (ibid.: 16). He uses his own concept of core gender identity to rely on but modifying the Oedipus complex by Freud as follows: The boy's first love is the mother but before the father comes in, Stoller already sees an:

earlier stage in gender identity development wherein the boy is *merged with mother*. Only after months does she gradually become a clearly separate object. Sensing oneself a part of mother - a primeval and thus profound part of character structure (core gender identity) - lays the groundwork for an infant's sense of femininity. This sets the girl firmly on the path to femininity in adulthood but puts the boy in danger of building into his core gender identity a sense of oneness with mother (a sense of femaleness). Depending on how and at what pace a mother allows her son to separate, this phase of merging with her leaves residual effects that may be expressed as disturbances of masculinity. (Stoller 1985: 16)

Stoller postulates a psychological “protogfemininity”. In fact, he does this for “cultures everywhere”. He adds that boys and men have the “need for constant vigilance against their unacceptable yearning to return to the merging in the symbiosis” (ibid.: 17). If the father does not support the dissolution of the symbiosis between mother and son and fails to serve as a “rival but also as a model for masculine identification” the “threats to maleness and masculinity are too severe’ and ‘perversion or neurosis intervenes” (ibid.: 14).

The Oedipus complex serves to postulate the necessity of femininity and masculinity. Those gender expressions are clearly defined by stereotypical abnormalities such as a little boy’s liking to wander around in high-heels. That this boy breaks the rules of a dress-code and a behavioral code in a binary sex(ualiz)ed/gender society is more than obvious. He “revolts” against the disciplinary system that his culture subjects him to. Knowledge of the Oedipus complex enables the description of a specific relationship between disciplinary systems and the family. The family, if not complicit in this disciplining effort, is deemed aberrant. The resolution of the Oedipus complex, if not provided by the family, causes the child to fail in his/her relationship to society. Mauro Basaure, with reference to Foucault, states that this relationship

is characterized by the fact that the disciplining takes place not through external, foreign interventions of the disciplinary systems into the family, but rather through the favorable collaboration of the family itself, which can be seen as the expression of a discrete and microphysical form of the functioning of power. (Basaure 2009: 342)

The nuclear family, psychoanalysis and society at large are systems of social normalization “by means of the introduction of the conceptual framework of the Oedipus complex” (ibid.: 353). Stoller’s theory, which employs the Oedipus complex, is, therefore, complicit in the normalization process. In his reasoning, this normalization is, furthermore, intrinsically linked with a patriarchal impetus. I do not want to imply here, however, that the Oedipus complex can be thought of without a patriarchal and phallogocentric framework. For Stoller the bottom line is that “Oedipal conflict ...[is] ...needed to produce the character structures, such as masculinity and femininity, that maintain the society” (Stoller 1985: 78).

Stoller, in his masculinist agenda, moreover, reinstalls the Freudian postulate of “genital primacy” of which, of course, “masculinity and heterosexuality are essential parts” (ibid.: 15). Stoller reiterates the Freudian concepts of penis envy and the castration complex and uses them to pathologize the “transsexual” as a “failed man”. Stoller’s conclusion to this reads as follows:

in brief, this newer view of gender identity holds that femininity in females is not just penis envy or denial or resigned acceptance of castration; a woman is not just a failed man. Masculinity in males is not simply a natural state that needs only to be defended if it is to grow healthily; rather, it is an achievement. (Stoller 1985: 18)

If this development is guaranteed, the boy “will prefer to have, not to be, a woman” (ibid.: 17). And it is at this point where his celebration of heterosexual masculinity kicks off, as for Stoller masculinity “consists of struggling not to be seen by oneself or others as having feminine attributes, physical or psychologic. One must maintain one’s distance from women or be irreparably infected with femininity” (ibid.: 18). Femininity, here, reads like a disease the boy has to avoid like death. Masculinity in Stoller’s eyes is an achievement which boys have to accomplish before the phallic phase sets in – “normal masculine boys” in this text are given an ultimate status. A boy can only be healthy if he becomes hyper-natural, aligning his male core gender identity with his masculine gender identity. Stoller has replaced the shaky concept of the biological force with another concept. Gender identity as masculine or feminine was not sufficient for Stoller, since his concept of sex needed backup. Sex as the essential binary feature in biological and psychological differentiation is reinstalled via the backdoor of core gender identity as being based on a protogfemininity; masculinity becomes an achievement.

However, Stoller destabilizes his own generalization of this theory of protogfemininity and the achievement of masculinity. He refers to a body of anthropological literature which challenges his theories by observing “prolonged gratification of infants in some primitive societies” (Stoller 1968b: 106). In these reports mothers and sons are “in a happy skin-to-skin contact for many hours of the day and night, and for years” (ibid.). Here, Stoller finds fault with the anthropological accounts because to him “the reports fail to mention that these customs, which sound the same as what is seen in our transsexual boys, cause excessive identification with mother” (ibid.). Stoller, however, fails, I argue, to see the possibility for rethinking his own theories. Yet, he admits that he does not have

the data to deal with this exciting complication. Only direct observation and comparison of the subtle way in which white middle-class American mothers versus these primitive mothers handle, breathe upon, coo over, nestle, hover over, ignore, look at, and otherwise impinge upon their infants can make true controls out of otherwise too gross observations. (Stoller 1968b: 106, 7)

Stoller, therefore, admits that his research lacks a control group from other cultures. He states that his “patients have been primarily white, middle-class Americans” and that he, therefore, plans “to correct this flaw in the future” (ibid.: xiv). In fact, he will try to do this together with Gilbert Herdt and Julianne Imperato-McGinley, whose collaborations are the focus of section 2 of this study. However, my contention is that Stoller failed to reconsider his theory; rather, he intensified the problematic assumptions in his work by going cross-cultural. The research Stoller undertakes with Herdt in Papua New Guinea (Stoller and Herdt 1985, 1990) and Imperato-McGinley in the Dominican Republic (Imperato-McGinley 1979a) is equally infiltrated with the notion of hegemonic heterosexual masculinity as the natural achievement of culture. In the research with Imperato-McGinley, Stoller again establishes his postulated biological force as the pre-natal influence of testosterone. In the collaboration with Herdt, however, his influence on the study can be seen in Herdt’s theorizing of a hermaphroditic gender identity for the hermaphroditic body. This hermaphroditic gender identity will be negotiated via terminologies of effeminacy to consolidate the claim of the masculinizing biological force (see section 2).

Hermaphroditic gender identity I

In his 1968 book on *Sex and Gender*, Stoller dedicates two chapters to first “the intersexed patient with normal gender identity” and second “the hermaphroditic identity of hermaphrodites”. In the chapter on “the intersexed patient with normal gender identity” Stoller reports a case of a person living as a woman, who began to cry after she was told that she was sterile. Stoller concludes that this

revealed the presence of three trends rooted in feminine identifications, and indistinguishable in broad outline from the response that would be found in a genetically normal-sexed young woman. The first trend was her desire to marry and to have children; the second, concern regarding the appearance and function of her genitalia; and the third, her feminine interests (in appearance, games, use of leisure, sexual relations, etc.). (Stoller 1968b: 19)

Being a genetically normal-sexed woman is clearly defined here. All the above-mentioned defining criteria can be understood to not include any characteristics of the range of so-called masculine identification. According to this logic, masculine identification excludes the desire to marry and to have children. So-called feminine interests are specific to particular types of appearance, games, leisure activities and sexual relations, presumably with men. Apart from the heteronormative and stereotypical manifestations of femininity, Stoller speaks in this chapter on normal identity in intersexualized people about the “naturalness” of identity (ibid.: 22). In the case of the woman who was told that she is sterile, the sadness expressed about this is interpreted as exclusively motivated by a feminine identification. Stereotypical interests, ranging from a specific appearance and sexual relations with men are further interpreted as feminine identification. Feminine identity is seen to have developed normally despite the person’s “hermaphroditic body”. I suggest that in Stoller’s argumentation conformity to stereotypes is, therefore, natural even though the chapter is entitled “normal identity”.

In the chapter on “the hermaphroditic identity of hermaphrodites” Stoller, however, in line with his continuing habit to create new categories and to naturalize identity, invents a new gender with a different core gender identity. He states that:

The clinical data illustrates that there are people who almost from the beginning of awareness of their own existence do not feel themselves to be members of either one of only two possible sexes. Because of their parents’ uncertainty as to their “true” sex, the patients are also uncertain. A sense of body configuration that is in fact different from others will produce a different body ego, and the child’s observation that he looks different from other children can only reinforce the uncertainty that his parents have produced. He is in that peculiar position of agreeing with all the world that there are, as it says, only two sexes, while he belongs to neither. (Stoller 1968b: 34)

Stoller cannot resist, even though having cautioned against the concept of gender identity in the introduction of this book, to install a separate core gender identity for the hermaphroditic person. He does this on the basis of the parents’ uncertainty over their child’s true sex, which consequently causes uncertainty in the child. With this he implies that all the body egos other people develop are the same because of their similar body configuration – dichotomously organized, we can assume, according to the parents’ certainty of one’s sex. I agree with Judith Butler that “there is not necessarily one imaginary schema for the bodily ego” (Butler 1993: 86) and neither are there just two, or three, as Stoller implies; there is a multiplicity. Butler rejects a single sex(ualized)/gendered identification that consolidates and reifies the ego and univocally characterizes one’s sex, gender, and desire. Butler concludes that masculine and feminine are arbitrary morphologies, including the genitals. Jan Campbell, refers to Freud’s definition

of the ego as “first and foremost a bodily ego; it is not merely a surface entity, but is itself a projection of a surface” (Freud 1961 [1925]: 26).⁷² She states that “the ego is a mental projection of the surface of the body. The ego is not simply a kind of consciousness based on biological and bodily affects; it also contains unconscious bodily affects of experiences” (Campbell 2000: 52). These unconscious bodily effects are often disregarded in simplifying theories on the body and the bodily ego. The body and the bodily ego, I argue, could rather be understood as an event, or a process of becoming that is not (solely) based on sex(ual)ized/gendered experiences of ones materiality (Budgeon 2003; Braidotti 2002). A myriad of experiences influences embodiment, which cannot be reduced to ones status as a boy or a girl, neither to ones sex(ual)ized/gendered body configurations. Embodiment can hardly be dichotomously produced since unconscious effects are not binarily organized.

The question, therefore, remains what Stoller’s postulation of a different body configuration means, since every body has a different body configuration. Moreover, in intersexualization the effects of surgical intervention are constantly neglected. Katrina Roen argued that if we understand the body as an event, then any surgery on the infant’s body “will be ever-present” in the adult’s later embodiment (Roen 2009: 21). Holmes argued that genital surgery makes bodies *more* intersex than they started out (Holmes 2002). Iain Morland notes in this regard that “with intersex births the signifiers ‘boy’ and ‘girl’ lose their anatomical referents” because “‘boy’ and ‘girl’ act out, rather than refer to, a sex difference” (Morland 2001: 537).

This acting out of boy and girl rather than referring to a sex difference, is present in all births whether intersexualized or not. Sexual difference would not have a meaning if the two signifiers were not applied to anatomy, morphology, the genitals. In line with Beatriz Preciado, I argue that on the “operation-table” of sex(ual) difference all subjects gain their “sex(ual)ized/gendered” significance. If chromosomes and the appearance of the genitals match accordingly to bio-medical parameters the “operation-table” functions through the application of the Butlerian performative reiteration of “sex(ual) difference” (interpellation as boy or girl). If they do not match, surgery is applied to the body to guarantee sex-gender-congruency (Preciado 2003: 95). In Preciado’s terms, intersexualized bodies block the mechanical work of the performative ‘operation-table,’ they dismantle the arbitrary character of categories and the “hetero-design” of bodies (Preciado 2003: 96).

Medicine creates sexual dimorphism out of intersexualized flesh in order to bring healthy but culturally unacceptable flesh into line with the signifiers of “boy” and “girl”. Hereby, the production of a different bodily ego that is produced by the surgery is completely ignored. In fact, as Roen argued, the infant is considered to have not “yet *become* a subject to whom the body is an important marker of selfhood” (Roen 2009: 21 emphasis in original). Therefore Stoller’s remark of the different bodily ego loses its grip, since he is also an advocate of surgery on infants’ bodies. Moreover, Stoller’s argument that it is the parents’ uncertainty, which produces the different bodily ego opens a completely new field which has recently been covered by Roen. To her, it is adults who project their fears and ideas about normality onto the child. These fantasies of normality are what the child is supposed embody. This disregards the immense implications that surgery and medicalization will have on the child’s sense of self and embodiment. These interventions are likely to dominate the embodiment and the bodily ego rather than giving the child the normality that the parents project onto it.

Yet, in Stoller’s account, however, it is not just the flesh that has to be aligned to the cultural signifiers of boy and girl. The identity of an intersexualized person, therefore, needs a neat category:

Such a person, then, belongs to an entity that has not previously been distinguished from other identity problems. He is a member of a third gender (a hermaphroditic gender), and the resulting character structure and the special ways he has of managing his life, in our society at least, are evidence of a different core gender identity, and therefore of a different life perspective. (Stoller 1968b: 34)

The third core gender identity Stoller postulates here is portrayed as fundamentally different from the male and the female core gender identity. A character structure that is different to the core gender identities of male and female – a hermaphroditic core gender identity – is postulated. However, the postulation of a different life-perspective for the person with a hermaphroditic core gender identity does not result in the possibility of living this different life perspective with a different body:

Depending on how disturbed his parents are about his ambiguity, he can wait with relative equanimity for the day when he will be fixed so that he can belong; or he does not wait, but bows to his fate of not really belonging to the human race; or he makes the best of both worlds, as seem to occur in those rare hermaphrodites who appear to live comfortably in alternating genders. (Stoller 1968b: 34, 5)

⁷² German original: „Das Ich ist vor allem ein körperliches, es ist nicht nur ein Oberflächenwesen, sondern selbst die Projektion einer Oberfläche“ (Freud 2000 [1923]: 294).

According to Stoller, the hermaphrodite does not belong to the human race. He states that the only option for a hermaphroditic person to belong to the human race is to be “fixed” or to live in alternating genders, which is rare. The “human race” as a powerful trope is called upon to delimit what a hermaphrodite is, or rather what s/he is not. This discursive production of humanness as *the* expression of binary sex(ual) difference is a condensation of norms that are repeatedly articulated. Interpellation as a girl or a boy, according to Butler, is the setting of a boundary and hereby the repeated inculcation of a norm. Holmes states in response to this that “one must be able to say either ‘I am male’ or ‘I am female’ not ‘I am I’” (Holmes 2008: 96). She adds as an explanation that “this latter statement does not even make sense, is not even thinkable, without the implication of sex – at least, that is the threat and the fear” (ibid.)

This complex is part of the power that delimits and sustains “that which qualifies as the human” (Butler 1993: 8). This delimiting process of producing a subject can be seen in the abjection⁷³ of those beings who “who do not appear properly ‘gendered’ (ibid.), as Butler states. With the production of somebody as abject “it is their very humanness that comes into question” (ibid.). These productions of normalizing powers are necessarily and forcefully fostered by a repressive violence that constructs a divide between bodies that matter and other “abjected” bodies. The “abject” is therefore a valuable tool to dismantle the processes of intersexualization, because it shows how the process of intersexualization, through positioning “normal” bodies as dependent on “other” and “abjected” bodies or identities constructs the normal (Butler 1993; Holmes 2008). In Stoller’s accounts normalizing powers of both erasure and production are at work. Repression is most obvious in the method of erasure, but what about the methods of production? What are the reference points for a possible production of the intersexualized subject?

Stoller argues for compulsory treatment of intersexualized people, which testifies to the method of erasure. He grounds his argument by referring to the inclusion of the intersexualized person into the human race. That which does not belong to the human race, the features of “ambiguity” and abjected characteristics, has to be erased through surgery in order to belong. Holmes explains this feature of intersexualization as follows:

Western culture, but not all cultures, teaches that human beings come in two biologically and anatomically distinct sexes. Intersex states confront this construction with a direct contradiction. The terms “ambiguous” and any of its variants as applied to intersexed genitalia still imply that the categories of male and female are stable, clear, and self-present. (Holmes 2008: 96)

However, Stoller has to acknowledge that some cases “appear” to live “comfortably in alternating genders”. He draws the “practical conclusion” that “one must accurately determine the patient’s core gender identity. If it has become firmly established, as it more or less is beyond two to three years of life, then it should not be changed” (Stoller 1968b: 38). He echoes Money et al.’s theory of surgical intervention in infancy; yet, with his postulation of a hermaphroditic core gender identity he has to caution against feminizing or masculinizing treatment of the child after this identity has been established. This of course does not contradict Money’s treatment paradigm, it rather enforces it especially in terms of urgency: the psycho-sexual emergency paradigm that requires operating before the first eighteen months. If the child is left alone, it might develop such a hermaphroditic core identity.

Yet, in Stoller’s theory the modes of production of the abject achieve a new meaning. A hermaphroditic body produces a hermaphroditic core gender identity if not erased. The concept of core gender identity derives from Stoller’s equation of sex(ual) difference with the boundary between gender identities and his denial of the plurality of developmental positions. The unilinear line of development, which he invokes with the concept of core gender identity, is ultimately referable to the anatomical difference. Hereby, protofemininity enables the celebration of masculinity. Stoller’s theory of core gender identity is unthinkable without the construction of femininity as “other”. Additionally, the construction of a third gender identity is unthinkable without the construction of a system of two against a system of three. The norm of binary sexual difference is naturalized through the inclusion of a third that does not interrupt the two, yet affirms them as the norm. The naming of intersexuality as an “extraordinary phenomenon” functions as an irritation and produces an affirmative argument concerning sexual dimorphism (Butler 1993; Klöppel 2002a, b). The reference to the “human race” hereby features as a powerful rhetorical instrument. The abject of the hermaphroditic body, through its position as the other, establishes and

⁷³ Julia Kristeva introduced the concept of the abject in psychoanalysis (Kristeva 1982). Abjection is derived from the Latin term *abjicere*. It means to expel, to cast out or away. According to Kristeva, the abject threatens the superego, which means that the abject is a threat to the ordering law of the subject or the self. A social being is constituted through the force of exclusion of impure entities such as excrement, menstrual blood, urine, semen, tears vomit, food, masturbation, or incest. The self has to erase these elements in order to become a social self. For Kristeva, the process of abjection, however, can never be fully completed since the excrement, menstrual blood, urine, semen, tears vomit, food, masturbation, and incestuous entities can never be fully obliterated. The self is haunted by these elements; it is constantly threatened to be disrupted or even dissolved. Abjection marks the borders of the self, yet it also always threatens the self constantly. Freud was the first to suggest that civilization is founded on the repudiation of certain pre-odipal pleasures i.e. the polymorphously perverse and incestuous attachments (Freud 1927).

reaffirms what is human and what is not. The concept of the abject can also be used to describe groups of people who are abjected by society. These groups of people are not objects but they are not subjects either. People on the margins of society are abjected because they do not conform to certain norms, such as hegemonic heterosexuality, masculinity, whiteness, ability, or middle-class attitude. The norm, again, can only be defined by reference to such “others”: abjected beings. Riki Wilchins explains that the margins of society “are margins because that’s where the discourse begins to fray, where whatever paradigm we’re in starts to lose its explanatory power and all those inconvenient exception begin to cause problems” (Wilchins 2004: 71). Wilchins, furthermore, explicates that at these margins “science no longer asks but tells. Nature no longer speaks the truth, but is spoken to” (ibid.: 79). In the research by Stoller interrogated above, this mechanism becomes clear; the norm is reinstalled by the reference to the natural abnormality of the hermaphrodite. The relation between the natural and the normal is in itself contradicting. In short, the “normal body” is diametrically opposed to the “natural body”, which is paradoxical in that Western discourses are organized as conceiving of the normal and the natural as one and the same. Thus, “other” bodies and identities become invisible through the techniques of normalizing bodies which are at the same time made to appear natural (see Holliday and Hassard 2001). The intersexualized body with the accompanying hermaphroditic core gender identity is one of them. If a male body produces masculinity and a female body produces femininity then a problem arises if a hermaphroditic body is acknowledged. Since the two other core gender identities are said to be produced by the body and are referred back to the body, then a hermaphroditic body disrupts this logic. Subsequently, the hermaphroditic body has to produce a hermaphroditic core gender identity in order to not threaten but reaffirm the naturalization of core gender identity as dimorphic. The biological force as the crucial arbiter of the development of a core gender identity becomes the prolongation of dimorphic sex. The postulation of a hermaphroditic gender identity for a hermaphroditic body does not put the binary framework into question; it reaffirms it.

Surprisingly, Stoller states in a chapter on “How biology can contribute to gender identity” that “what in those days seemed evident to many – that biological forces are peremptory in human gender behaviour – is now for me in most cases less a rule and more an unlikely hypothesis” (Stoller 1985: 73). With this statement, Stoller dismisses his entire work on the biological force that he previously introduced as fundamental for his category of core gender identity. He never gave up on the biological force, even though he admits that “we do not yet understand these processes and so do not have an accurate language for them” (ibid.: 13). He does, however, believe them to induce “certain modes of behaviour” (ibid.). He thus opens a new space, even if not for his own work, as he will nevertheless continue to work with the assumption of the biological force.

Conclusion

Stoller’s heavy investment in the biological force represents his constructive essentialism. The concept and/or discipline of biology can be called upon any time the cultural organization of sex(ual) difference requires justification, even if it is just postulated as some mystic entity which is only invoked but not “proven”. The power that comes with the productions of knowledge on bodies is intrinsically intertwined with the organization of these bodies and associated gendered identities along a hierarchical coordinate system. In Stoller’s research the feeling of being male or female is explained by a core gender identity which supposedly came to this world with sexual dimorphism and will always remain its core is an affirmation of the status quo of the organization of these bodies. Stoller’s rewriting of the formation of dichotomous gender identity from the oedipal into the pre-oedipal stems from the projection of sexual dimorphism into gender identity. Stoller conceptualized the biological force as binary, and positioned it before the cultural. With his selective and referential reading of Freud’s drive theory Stoller associates the biological force with exclusive heterosexuality.

His interest in intersexualized children brought Stoller to studying transsexualized children. In making the mother responsible for a failed masculinity and referring to her as tomboy or bisexual, Stoller could reinstall the heteronormative Oedipus complex. Moreover, Stoller reconfigured the triangularity of the Oedipus complex into a basic structure of profemininity. This profemininity has to be overcome by the struggling masculine component at the cost of a loving mother-son relationship. What is made impossible is a masculinity which can cope with intense bodily contact with the mother. The heterosexual, patriarchal, nuclear family is manifested as a biologically “divine” entity, which from the beginning produces stereotypically, and “normally” behaving men and women, who will naturally know their place in society and behave to secure the status quo. Ascribing an a priori core identity to subject(ive)ities sets the sex(ual)ized/gendered symbolic order as a priori and thereby naturalizes it. The possibility of a narrative structure that is not reducible to one story is suppressed by the all-mighty invocation of biological determinism. The status quo is here manifested by the concept of binary “nature”; the never changing biological force. He not only reinstalls the Oedipus complex as the precondition for patriarchal culture but

also prevents any other narrative that could be inclusive enough to accommodate more than dichotomously organized genders. The intersexualized body threatens the concept of a dimorphous biological force that exclusively produces neatly and binary gendered core identities. In order to remove this threat Stoller postulated a hermaphroditic identity on the basis of a hermaphroditic body. What can be named and abjected can also be easily kept at bay. Stoller established a *hierarchy of normality in nature* in intersexualization.

3. *Feminist biology and the Five Sexes*

Introduction

The gender-concept, derived from Stoller's *Sex and Gender* (1968), was first adapted by Ann Oakley in 1972 to feminist analysis. Since then feminist scholars, mostly in the United States, have eagerly adapted it and used gender as an analytical tool to interrogate social, political and cultural formations. There is an irreplaceable value in this analysis of gendered socio-political roles. The interdependency between gender and race and other categories, such as ethnicity, age, ablebodiedness or class can and have been addressed by using gender as a category of analysis. However, feminist and queer theorists working with gender as a concept should not ignore the genealogy of the gender-concept and its intrinsic pathologizing features. The genealogy of the gender-concept always implies sex and is based on it. Gender is unthinkable without sex; Judith Butler (1990) powerfully demonstrated that sex is always and already gender.⁷⁴ But the generic problem of working with gender as a theoretical and/or methodological tool is the presence of sex. To leave sex out of the picture "would be to assume not only that we know what sex means, but also that its meaning has not changed and cannot change" (Chanter 1995: 43). This statement by Tina Chanter is a categorical one and somehow ignores the efforts by numerous feminist biologists who have been contesting, analyzing and rewriting traditional heterosexist and patriarchal conceptualizations of (human) biology. In this chapter I pay attention to these feminist engagements with sex, biology and the human body with regards to its implications for intersexualization.

Jan Campbell, whose book *Arguing with the Phallus* I much admire for its complex account of psychoanalysis, queer theory and postcolonial theory, states that:

Robert Stoller (1974 [i.e. *Sex and Gender*]) had a great influence on the gender debates in feminism. His work was claimed as a breakthrough by those who wanted to advocate the social construction of sexuality. By arguing that an individual's gender identity was basically a product of post-natal psychological influences, he made biological arguments for sexual identity redundant. Stoller's work was not simply taken up by psychoanalytical feminists such as Chodorow and Dinnerstein, but also by radical feminists, such as Kate Millet and social feminists such as Michele Barrett. (Campbell 2000: 26)

This quote refers to the immense influence that Robert Stoller's and John Money's distinction between sex and gender had on feminist theory. Yet, Campbell's statement is incorrect in the sense that Stoller never made biological arguments for sexuality redundant. Stoller not only argued for a bifurcated or trifurcated biological force that presumably influences the development of gender identity, but he was also convinced that there is a core gender identity that is either and exclusively male or female (or hermaphroditic). To be deemed normal, these gender identities had to be congruent with the masculine, feminine or hermaphroditic body.⁷⁵ Therefore, as I argued in the preceding chapters, Stoller's and Money's theories are just as essentialist and deterministic as those who argued that there were only two sexes resulting in specific genders – they may be constructivist in the sense that they give credit to the processes of socialization, but these constructivist moves are still intrinsically bound up with the essentialist notion that sex is dimorphic and that genders follows this natural precondition.

⁷⁴ The category of gender produced controversies between feminist scholars most prominently between Judith Butler and Rosi Braidotti (Braidotti 1994b). This debate has been fought mainly from two positions: the one of feminists working with the gender-concept and that of those working with the psychoanalytical concept of sexual difference. The concept of identity functions differently in interdependent categories of lived economic, social, cultural and political relationships than it does in psychoanalysis. It is arguably difficult for feminists to work with psychoanalysis and to extensively and exhaustingly analyze the complex relationships between economic, political, historical and social gendered phenomena. However, in these debates, the fact that the gender-concept has been developed in intersexualization has not been paid much attention; this is a neglect of the genealogy of the gender-concept. In the previous chapters I demonstrated that the gender-concept is by no means free from essentializations; neither is it free from psychoanalytical references.

⁷⁵ Moreover, Stoller laid the grounds for later theories of prenatal hormonal influences on the brain, thereby preconceiving the so-called masculine or feminine development of the psyche as later developed by Milton Diamond (Diamond 1997, 1999).

Moira Gatens states that Freud always struggled with the problem of finding a definition of masculinity and femininity and their relation to men and women in the *Three Essays* (Freud 2000 [1905]). “However”, Gatens writes, “the authoritative source for the recent prominence of writings centering on gender is not Freud, but Robert J. Stoller, a contemporary psychoanalyst” (Gatens 1991: 141; also 1996). Toril Moi also observed the gender-concept and its implications for feminist theory. She states that the distinction between sex and gender “medicalizes” sex and turns “gender” into a “purely psychological category” (Moi 1999: 22). She further explains that “it was Stoller’s explicit contrast between sex and gender that fired feminists’ imagination” (ibid.). However, as Chanter points out, “the potential for construing gender independently of sex was seized upon by feminists, who tended to divorce the distinction from its psychoanalytical context” (Chanter 1995: 41).⁷⁶ As I have demonstrated in the previous chapter, the gender-concept is by no means free from psychoanalytical references. However, intersectional approaches have profited immensely from the concept of gender (Crenshaw 1989). However, this is a debate, which, due to space, I cannot expand upon in this dissertation.

In this chapter, I first look at feminist scholarship that has tackled the notion of sex in biological knowledge production. Of special interest will be feminist encounters with sex, or the body. Critical feminist sex studies have immensely contributed to the dissolution of essentialist notions of the body, as I will demonstrate. I then provide a case study of a feminist biologist’s approach to intersexualization, i.e. a critical investigation of the construction of “intersexuality” in the work of feminist biologist Anne Fausto-Sterling. I will introduce her work by placing it in the context of the history of critical engagement with the body. I chose to analyze Fausto-Sterling’s proposal of the *Five Sexes* because it was the first critical biological one, it initiated the intersex movement and it shows most explicitly how the sex/gender distinction has its reminiscences in feminist biologists’ approaches to sex(ual) difference. Secondly, I will review the history of the problematization of the gender-concept by Judith Butler and briefly touch upon newer theories developed by material feminists, which I see as promising in overcoming the distinction between sex and gender. I argue that there might be potential to intervene powerfully into intersexualization in the future. In this chapter I briefly touch upon this discussion, yet focus on the implication that the gender-concept had for feminists who relied upon the distinction.

3.1 The Body in Feminist Biology

In the first section of this chapter I look at feminist scholarship on critical biology with regard to intersexualization. In critical feminist biology it has become increasingly clear that biological knowledge production about women’s bodies is intrinsically sexist and patriarchal and finds its expression in a pathologizing and medicalizing discourse. In the early 1980s, the seemingly monolithic female body of previous feminisms (egalitarian- and difference-feminism) experienced a twofold theoretical blow. The first was that power vectors became multiple; the second was that body theory experienced a discursive turn. The political and academic climate in the early 1980s developed new conceptions of multiple identities, positionalities and locations that countenanced race, class, age, disabilities, sexual orientations and other variables (e.g. Crenshaw 1989; Fausto-Sterling 1995; Moore and Clarke 1995). This also influenced notions of sex as a biological construct. Jane Flax, for example, argued that “biology and nature are rooted in social relations; they do not merely reflect the given structure of reality itself [...] feminist theorists need to deconstruct further the meanings we attach to biology/sex/gender/nature” (Flax 1990: 50). Feminist critical sex studies are rooted in several strands of theoretical thinking. Critical investigation into the construction of bodies as well as sex(ual) difference has a long tradition and is associated with some influential authors (e.g. Fausto-Sterling 1985; Haraway 1991; Bordo 1993, 1989; Birke 1999). Body history means the historicizing of the production and perception of bodies. The body is an inter- and transdisciplinary subject that only becomes intelligible through the analysis of several distinct mechanisms and technologies. To a great extent it was, however, the gender-concept that enabled feminist theorists to shed new light on the construction of sex(ual) difference as firstly historically variable and secondly (and consequently) as dependent on gendered conceptualizations in the bio-medical disciplines.

The dawn of theories about the body and its construction can, however, be located at the beginning of the 20th century, before feminists started engaging with sex. Key figures of the historicization of the body came from different disciplinary backgrounds. Maurice Merleau-Ponty’s approach in the 1940s was phenomenological and anthropological. He was the first to talk about the conception of the “lived

⁷⁶ Since then, the schism dividing feminists who work with sex and gender and those who work with the concept of sexual difference has been intensively discussed (Braidotti 1994a, 2003, Chanter 1995, Gatens 1991). For some feminists the very distinction between sex and gender has become emblematic for feminism. The distinction may have been adopted too uncritically, as Chanter argues, “this invocation, this history, this lineage tends to be passed over by those who suspect the French feminists of relying too heavily on the fathers of psychoanalysis, Freud and Lacan” (Chanter 1995: 40). The distinction that is so inherently problematic has sometimes been used to dogmatically reject French feminism and psychoanalysis.

body". His emphasis was on the investigation of the body as an active participant in the creation of the self. Merleau-Ponty gave to the body an ontological status in respect to the location of subjectivity in the body and not in the mind or consciousness (Merleau-Ponty 1962). Marcel Mauss developed the concept of *body techniques* and made possible a different approach to the body as the result of a whole range of material practices, objects, and skills, devised and used by humans in interaction with each other and their surroundings. Mauss interrogated the relationship between symbolic systems, social structures and the body, while analyzing the way cultural systems relied on the body's expressive resources to formulate social relations. In his terms, the human body was always defined according to cultural beliefs about social relations (Mauss 1936). Norbert Elias developed the concept of civilization in which he described the body as an object of disciplining mechanisms (Elias 1978, 1982). Last but not least, Michel Foucault greatly influenced the theorization of the body. Foucault has become inescapable for historians of bodies. Foucault shifted the attention from language to discourse. He regarded discourse as a system of representation, of language *and* practice. In his later work, he focused on the relationship between knowledge and power and placed the body at the centre of the struggles between different formations of power and knowledge (e.g. Foucault 1978, 1965). He introduced the term of *discipline* in respect to the formation of the individual; his work was groundbreaking in respect to discursive formations of the body. In relation to this, his understanding of normalization is described in *Discipline and Punish: The Birth of the Prison* (1977). Here, Foucault concludes that "the power of normalization enforces homogeneity; but it individualizes by making it possible to measure deviations, to set levels, to define specialties, and to render differences useful by calibrating them one to another" (Foucault 1977: 182-84). The Foucauldian notion of power is that it is "proportional to its ability to hide its own mechanisms" (Foucault 1978: 86). To him, the body is a bio-political truth and medicine is a bio-political strategy that infiltrates the body at several levels and produces it as that what we understand as the human body (Foucault 2002). Recent research into the history of medicine is often based on Foucault, and has contributed particularly to a new understanding of the discursive formation of the body through medical discourse (e.g. Levin and Salomon 1990). Using a Foucauldian analysis, scholars started approaching gendered/sexed and medicalized bodies through the context of language and practices, which also enables a different approach to the intersexualization of some bodies (e.g. Stoff 2001; Lorenz 2000; Feher 1989).

Body historians started approaching the images of biological "facts" as embodying "reality". These biological facts embody reality, as critical intersex scholar Iain Morland states, precisely through "refolding the interrelated discourses of knowing and telling. The image is real not because it offers a transparent window to the world, but because it actively contributes to the world's materiality" (Morland 2001: 542). Moreover, any investigation into biological facts, like chromosomes, or hormones, first represents the techniques of microscopy, molecular biology, photography, printing and bookbinding - and then the shape of the chromosomes, of the substances of hormones (ibid.). Therefore, the body's reality is first and foremost the representation of technologies and their limits. The body's materiality, as a result, can be seen as emerging through the materiality of technologies and their boundaries with regards to representation. Furthermore, feminist research in technologies has immensely contributed to a critical perspective on the application of technologies as part of male supremacy and patriarchal power (Silverstone and Hirsch 1992; Wajcman 1996; Rothschild 1983). With regards to technological development and intersexualization Suzanne Kessler states that

the equation of gender with genitals could only have emerged in an age when medical science can create genitals that appear to be normal and to function adequately and an emphasis on the good phallus above all else could only have emerged in a culture that has rigid aesthetic and performance criteria for what constitutes maleness. (Kessler, 1998: 26)

Consequently, the critical stance towards technology and the advances in medical surgical techniques have also been considered and revealed as phallogocentric. Bernice Hausman voices the argument that developments in medical technology and practice were necessary precursors for transsexuals' demand for "sex change" and their distinctive transsexual subjectivity.⁷⁷ Through an analysis of 20th century developments in endocrinology and medical surgical technology, she explores the production of contemporary transsexual identity. In her account, the transsexual subject is employed as a production of technology and, therefore, as the personification of the regulatory "myth" of gender.⁷⁸ However, Hausman's concentration on technology seems too focused and ignorant of other social, cultural, political, or personal technologies that might shape (transsexual) subjectivity. To claim as Hausman does, that

⁷⁷ Transsexualism has been a subject of contention within feminism ever since Janice Raymond in 1979 published her condemnation of transsexual subjectivity and medical technological intervention as always and necessarily patriarchal. Since the early nineties, a critical terrain developed around the "transsexual subject" in feminist and queer theory. The transsexual subject was either seen as wholly gender-normative, or wholly gender-deviant.

⁷⁸ She uses the Barthesian concept of "myths" to argue for a new perception of gender. Thus, in her account gender has displaced sex and the body as primary semiotic chain while gender naturalizes heterosexual reproduction.

technology produces only specific kinds of subject(ive)ities, is to strengthen the notion that there might be subject(ive)ities that are not subjected to technologies and, therefore, more natural.

The historicization of the body with regard to sex(ual) difference has, for instance, been put forward by Thomas Laqueur, who traces the process of anatomical dichotomisation, which he calls the shift from the *one-sex model* to the *two-sex model*.⁷⁹ Laqueur argues that this change in perception was motivated by a political agenda and not by new medical insights into anatomy. He shows that sex(ual) difference is always a consequence of the social, political and cultural construction of gender determining what counts as sex. Because of his historical perspective, he can state that “during much of the 17th century, to be a man or a woman was to hold a social rank, to assume a cultural role, and not to *be* organically one or the other of two sexes. Sex was still a sociological, not an ontological, category” (Laqueur 1990: 142).⁸⁰ Laqueur debates the significance of different approaches to the body in different historical periods, including early Christianity, the Early Modern Period and the 19th century. However, Laqueur’s distinction between gender and sex might not be appropriate for the Early Modern Period since this constructs a notion not embraced during that time.⁸¹ According to Laqueur, it was during these periods that the shift from the *one-sex model* to the *two-sex model* took place. Gender dichotomy, therefore, in Laqueur’s view, is not something inevitable, dictated by the natural fact of the two sexes. Concerning the investigation of the perception of hermaphroditism, Laqueur concludes that “maleness and femaleness did not reside in anything particular” (Laqueur 1990: 135). “Thus,” he reasons, “for the hermaphrodites the question was not ‘what sex they are really’ but to which gender the architecture of their bodies most readily lent itself” (ibid.). His groundbreaking study has encouraged the notion of the constructed nature of the bodies as sexually dimorphic. His account has powerfully shown that biological explanations of the body are deeply rooted in the political, cultural and social orders of the word.

Concerning the construction of bodies in contemporary bio-medicine, feminist critical theories started tackling the universal claims of truth about the body expressed by natural scientists. Coming from all fields of knowledge production, feminists started to be concerned with the relationship between biology and politics and started viewing and interrogating biological knowledge production from a critical feminist perspective (Rees 2007). Emily Martin, anthropologist, for example, studied the power of metaphor in modern medicine in her book *The Woman in the Body*. Martin interviewed more than 150 women from different backgrounds of ethnicity, age and class. She demonstrates that menstruation is constructed differently throughout time and space and on the basis of race and class. Moreover, she reveals physicians’ conceptualization of women’s bodies and their reproductive abilities as value-laden in respect to the sexist and racist rhetoric of society (Martin 1989). Martin also demonstrated, however, that women resist the mechanical metaphors to which medical practice and “expertise” subjects their bodies. In an article on *The Egg and the Sperm* Martin shows how stereotypical narratives of male and female behavior are used to describe reproductive processes on the level of egg and sperm (Martin 1999). Donna Haraway detects assumptions about gender in the studies of the behavior of primates (Haraway 1992). Her research reveals that interpretations of animal behavior are intrinsically connected to the socio-political background of the researcher. The representations, which follow from studies of animal behavior, reflect the researcher’s perspective upon human behavior and not those of animals. Haraway has, throughout the last few decades, immensely contributed to the history of science from a feminist perspective. She analyzes “human nature” as an effect of power, which is rearticulated and re-produced permanently by the negotiation of the boundaries between human and animal, body and machine (Haraway 1991, 1997). Evelyn Fox-Keller deconstructs the claim to objectivity in the natural sciences by showing how cultural stereotypes of masculinity play into the construction of the scientist and *his* profession (Fox-Keller 1983). Her recent research focuses on the deconstruction of narratives in genetics and the uses of metaphors, models and the notion of development in biological narratives (Fox-Keller 2000, 2002). Her research demonstrates that biological concepts are culturally located and shaped by complex social forces. Ruth Bleier, a neurophysiologist and politician, criticizes Darwinism and socio-biology, and analyses the interconnection and interdependencies of the natural sciences with power structures such as patriarchy, capitalism and colonialism (Bleier 2002). She mainly analyzes the production of biological entities such as genes as independent from environmental influences. Even minute biological units, she reveals, interact with the surroundings. Linda Birke has criticised the abstract manner in which anatomy is depicted and how the

⁷⁹ Thomas Laqueur has mostly been seen as a Gender Historian. Since I will discuss his approach with regard to his conception of the body as a product of bio-medicine which created the notion of the body as a monolithic and a-historic entity, I treat him as a theorist of Critical Sex Studies.

⁸⁰ Note that Laqueur’s quotation needs to be read not as implying that sex/gender is not a sociological category anymore, because it is.

⁸¹ Criticism of the unified notion of the one-sex model as implied by Laqueur has been voiced by a number of authors (e.g. Daston and Park 1995, Schleiner 2000), who stressed that they do not see it as simply and coherently represented as Laqueur does. Moreover, Laqueur’s account is problematic with regard to his installation of the *two-gender system* as ahistorical. (Daston 1991; Daston and Park, 1995; Epstein 1990; Jones and Stallybrass 1991; Long 1999). Even though Laqueur manages to historicize sex, he ontologizes gender by assigning the category an ahistorical presence thereby reaffirming the distinction. However, his account has powerfully shown that “biological” explanations of the body are deeply rooted in the political, cultural and social orders of the word.

body is thereby produced as having a surface and an inner space (Birke 2002). Birke describes how our inner and outer spaces are constructed as diametrically opposite and distinct and how this distinction is communicated by gendered language. She argues that biology should be seen in the light of other disciplines from which it recruits its vocabulary: cybernetics, statistics, the arts and “facilities” of abstraction, the non-spiritual perception and conception of the world (e.g. our skin as the limit, frame and enclosure). She powerfully reveals the androcentrism and racism in the discipline of biology by interrogating the terminology from socio-political spheres, which reaffirm the status quo it relies upon. Barbara Duden (1997) read the rhetoric of the cold war in the descriptions of the immune system. Several feminist historians of science and critical biologists have powerfully shown how socio-political circumstances influence “biology talk” about the body and consequently sex(ual) difference. Reproduction has, of course, been one of the most interesting topics for feminists concerned with the construction of bodies. The motherly body has been detected as one of the most powerful stereotypes of the female body. Ruth Hubbard, for instance, has investigated the relationship between bioethics, new reproductive technologies and genetic engineering (Hubbard 1990; see also Sawicki 1991). Nelly Oudshoorn is famous for her critical feminist investigation in endocrinology, which documented how hormones were categorised as sexually specific. Intersexualization, in fact, led to a discussion of the history of hormone research and of the social and political reasons that helped to designate testosterone as male and oestrogen as female. The origin of endocrinology as a discipline can be found in the 1920s. Richard Goldschmidt, an endocrinologist, actually coined the term “intersexuality” in 1916 as shown in the introduction (Goldschmidt 1916). Carol Worthman argued that hormonal action is mediated through an array of other factors and that hormones do not directly have specific biological or behavioral effects (Worthman 1995: 595). As Oudshoorn and Fausto-Sterling have demonstrated, the designation of hormones as either male or female has helped to construe *the* essential difference in male and female bodies (Oudshoorn 1994, 1991; Fausto-Sterling 2000a). The fact that the production of sex(ual) difference is tautological and works in a circular argument assuming that male hormones equal male and female hormones equal female is more than exemplified in endocrinology. All these critical feminist biologists and historians of science have contributed to the notion that the body as a concept served, and still serves, as *the* foundation for sexual dimorphism, gender and sexuality. The descriptions of the (sex(ual)ized/gendered) body is intrinsically bound up with the social and political circumstances in which it is dissected, interrogated, examined, diagnosed and treated. The various propositions of a history of the body and sex have produced wide-ranging shifts in the perception of the body in some academic circles. Its supposed naturalness and its former truth have been tackled. The truth-claim, which has been placed upon the body, has been dismantled as a construction of differently shaped powers. The core of the investigations sketched in the previous paragraphs is not just that body experiences vary through time and space but also that there is no so-called “nature” of the body that can be captured or represented. Nor is there a natural sexual dimorphism. It was discovered that scientists are “actively constructing reality rather than discovering reality” (Oudshoorn 2001: 202). Blackless et al. have interrogated the position of and by bio-medical scientists towards their own discipline and state that

Biologists and medical scientists recognize, of course, that absolute dimorphism is a Platonic ideal not actually achieved in the natural world. Nonetheless, the normative nature of medical science uses as an assumption, the proposition that for each sex there is a single, correct developmental pathway. Medical scientists, therefore, define as abnormal any deviation from biomedically distributed genitalia or chromosomal composition. (Blackless et al. 2000: 151)

In this quote it seems as if biologists and medical scientists are aware of the ideological underpinnings of their so-called hard sciences, yet still buy into the normative structures and modes of differentiation. The implication of the developmental pathway for each sex as distinct is still being projected onto human behavior in general.

In 1985, Fausto-Sterling pointed out in *Myths of Gender* (Fausto-Sterling 1985) that it is often extremely difficult to unravel arguments about the way in which biology is supposed to determine human behavior. This becomes especially clear in intersexualization where behavior and identity are at stake. Money’s gender role theories are intrinsically bound up with the concept of innate bisexuality as the original form of human beings which have to develop from this into a heterorelational mono-sexuality. Stoller’s biologically infused psychoanalytical theories have paved the way for researchers who would later essentialize gender identity as being not just influenced but fundamentally caused by this supposedly Platonic dimorphic structure of the materiality of the body, be it hormones, genes or the brain. The natural sciences have, especially in recent years, re-claimed and re-gained the power of definition over the body. Especially in intersexualization, theories about the truth of the body as either male or female has taken a new route because of the developments especially in genetics and neurophysiology. William Reiner, urologist and psychiatrist at Johns Hopkins, argues for genetically determined sexual identity on the basis of genetics and hormones. Reiner states that “the brain is the most important sex organ. Sexual

dimorphism of the brain influenced by androgens appears to play a significant role in the etiology of gender identity” (Reiner 1999: 365). What we can see here, as Morgan Holmes stated, is that “the commitment motivating research into brain sex is the desire to determine what makes males and females radically different, rather than what makes them overwhelmingly similar” (Holmes 2008: 134).⁸² This is one of the most prominent features in intersexualization; the quest to define what makes males and females different. A viable and scientific distinction is searched for. This scientific distinction, however, is constantly redefined and adapted to the newest scientific developments. Every new discovery and gain in knowledge about the body’s makeup is interpreted in the framework of the coordinates of maleness and femaleness. This feature can also be detected with regards to critical feminist research into intersexualization, as I show in the following paragraphs.

3.2 The Five Sexes

Anne Fausto-Sterling is Professor of Biology and Women’s Studies at Brown University (USA). For more than twenty years she has worked on questions of evolutionary biology, endocrinology and the neurosciences. With her publication of the provocative article *The Five Sexes* in 1993, she more or less initiated the intersex movement in the USA. Shortly after the publication of this article, Cheryl Chase (intersex activist) founded ISNA (Intersex Society of North America, now renamed Accord Alliance). Chase initially announced ISNA’s existence by publishing a letter to the editor in response to Fausto-Sterling’s article. The society did not exist yet but from then on Chase received letters from intersexualized people around the world, and ISNA was brought to life. In winter 1994, the first issue of the newsletter *Hermaphrodites with Attitude* was published and in January 1995 a support group was founded. ISNA first went on-line in January 1996. I want to stress the political significance of Fausto-Sterling’s work; however, in the following paragraphs, I contextualize her work in the processes of intersexualization, since I see some of the arguments she articulates in opposition to a critical intervention in intersexualization and as complicit in the manifestation of sexual dimorphism. Of course, I do not want to dismiss her work in general because it was immensely important for a de-pathologizing approach to “intersexuality”. Nevertheless, I want to show the pitfalls of her approach since I suggest that an evaluation of her important contribution is important for further critical engagement with intersexualization also from the perspective of critical sex studies.

In her groundbreaking article “The Five Sexes” Fausto-Sterling provocatively advocates the categorization of so-called intersex conditions into five states. Three of these are:

the so-called true-hermaphrodites’, whom I call herms, who possess one testis and one ovary (the sperm-and-egg-producing vessels, or gonads); the male pseudohermaphrodite (the “merms”, who have testes and some aspects of the female genitalia but no ovaries; and the female pseudohermaphrodites (the “ferms”, who have ovaries and some aspects of the male genitalia but lack testes. (Fausto-Sterling 1993: 21)

Fausto-Sterling suggests that “the three intersexes, herm, merm and ferm, deserve to be considered additional sexes each in its own right” (ibid.). The remaining two sexes are male and female. She further argues, however, that sex is a “vast, infinitely malleable continuum that defies the constraints of even five categories” (ibid.). Fausto-Sterling here posits intersexualized bodies as additional to the “original” or “generic” categories. I argue that the notion that is evoked here occurs in the vast majority of accounts on “intersexuality”, not just those by the psychologists and physicians, whose case studies form a crucial part of my analysis, but also those by feminists trying to understand “intersexuality”. In Fausto-Sterling’s proposal, the Victorian definition of the “Age of the Gonads” (Dreger 1998) which privileges the reproductive organs as the salient factor is featured. Her repetition of the “Victorian” categories of so-called true hermaphrodites and pseudo-hermaphrodites reiterates this specific classificatory system.⁸³ Interestingly, with this categorization Fausto-Sterling is not too far removed from contemporary surgeons, Felix Conte and Melvin Grumbach, both fierce advocates of surgery in newborns. They state that “sex determination, accordingly, is fundamentally gonadal determination. Sex differentiation involves

⁸² Holmes, furthermore, notes that she is especially worried about genetic research into “intersex births,” since “the premise that there is ‘nothing we can do about an intersex brain’ plays into the hands of those who will say that if we cannot fix intersex then we should just get rid of it altogether” (Holmes 2008: 134), thereby indicating the eugenic background to contemporary research into intersexuality.

⁸³ The representation by Dreger of this period as unified in its approach to hermaphroditism has already been defeated by Ulrike Klöppel who demonstrated that the term Age of the Gonads disregards the multiple and controversial approaches by numerous researchers at the time (Klöppel 2009). However, I rely upon Dreger’s conceptualization here since it demonstrates that different categorization systems are repeatedly called upon to make hermaphroditism/“intersexuality” intelligible for a wider audience. Moreover, it proves that the Age of the Gonads is not a historical phenomenon limited to a specific time frame it rather reoccurs at certain points in time.

downstream processes subsequent to gonadogenesis, including the differentiation of the genital apparatus and hence the phenotypic sex” (Conte and Grumbach 2003: 260). Both accounts, the one by Fausto-Sterling and the one by Conte and Grumbach, reify the determination of sex by the 19th century classification via the complementarily defined reproductive structures. Interestingly, this contradicts the Money protocol (see chapter 1), since reproductive capability was dismissed as the decisive factor for surgical intervention. Both accounts, therefore, testify to the existence of different approaches to “intersexuality” at the same time. However, the use of this Victorian classification reiterates the reproductive imperative and cannot free hermaphroditism/“intersexuality” from the abject status it has been assigned in the heteronormative biopolitical imperative. Suzanne Kessler also offered a critique of Fausto-Sterling’s proposal and exposes the problem of a gender-concept that always implies sex. Kessler states that “validating alternative genitals validates alternative ‘sexes’ and damages the privilege of ‘female’ and ‘male’. But the issue is gender and not ‘sex’” (Kessler 1998: 90). The limitation with Fausto-Sterling’s proposal of the “Five Sexes” is, according to Kessler,

that legitimizing other sets of genitals still gives genitals (albeit in more than two forms) primary signifying status and ignores the fact that in everyday world gender attributes are made without access to genital inspection. There is no sex, only gender because gender performance is the primary in everyday life. This gender is performed regardless of the flesh’s configuration under the clothes. (Kessler 1998: 90)

Even though Kessler misreads Fausto-Sterling’s proposal as using the genitals while it is the gonads Fausto-Sterling focuses on, her critique is valid from a perspective on gender that works with the assumption that sex is always already gender. I engage with this discourse below by referring to Judith Butler’s deconstruction of sex. Yet, first I continue with my analysis of Fausto-Sterling’s version.

In Fausto-Sterling’s account, rhetorical problems can also be detected concerning implicit heteronormativity. Fausto-Sterling cites the case of the urologist Hugh H. Young, urologist at the Johns Hopkins Hospital. She seems delighted by his open-mindedness because he “showed unusual even-handedness in referring to those people who had had sexual experiences with both men and women and as both man and woman as ‘practising hermaphrodites’” (Fausto-Sterling 1993: 23). Yet, what does it mean to have sexual experience as a hermaphrodite? What does it mean to have sex as a woman or as a man? If one “has sex as a man” does it mean that one penetrates a woman? Or does one penetrate a man? Or is one penetrated by a man, or by a woman? What about non-penetrative sex? The term “practising hermaphrodite” holds a paradox: the term “practising” here serves to describe sexual activity. This activity can only become meaningful if it is wielded onto another person. Therefore, the activity is always homosexual *and* heterosexual, if not even bisexual. Fausto-Sterling states that “intersex identified” persons possess the “ability to live sometimes as one ‘sex’ and sometimes as the other” (ibid.). Even if the hermaphrodite is practicing it implies that sexual orientation is wielded upon an other that is either “same sex” or “opposite sex”; even though the hermaphrodite challenges this distinction and any so-called “orientation” in sexual desire or practice. In Fausto-Sterling’s account, however, the practicing hermaphrodite seems to be disciplined into a state in which his/her sexual orientation is referred back to bisexuality thereby reinstalling the binary framework of the heteronormative matrix.

Fausto-Sterling, furthermore, states that “*hermaphrodites have unruly bodies*. They do not fall naturally into a binary classification; only a surgical shoehorn can put them there” (Fausto-Sterling 1993: 24, my emphasis). By declaring that intersexualized people do not fall *naturally* into a binary classification, she actually naturalizes this binary classification. She implies that the rest of the world *does naturally* fall into that natural system. The rule of sexual dimorphism is reinstalled when it is stated that these bodies are *unruly*. Fausto-Sterling here refers to Foucault’s concept of biopower and argues in accordance with him that the medical establishment has fostered “the complete erasure of any form of embodied sex that does not conform to a male-female, heterosexual pattern” (Fausto-Sterling 1993: 23). She adds to this that “ironically, a more sophisticated knowledge of the complexity of sexual systems had led to the repression of such intricacy” (ibid.). In my understanding of the Foucauldian concept of biopower, however, this “sophisticated knowledge” she talks about has *necessarily* not *ironically* led to repression. I argue that validating “sophisticated knowledge” reads quite differently from Foucault’s approach to knowledge production. Foucault’s conceptualization of knowledge production should rather be read in line with Jana Sawicki who states that knowledge production works differently, namely in the way “that deviancy is controlled and norms are established through the very process of identifying the deviant as such, then observing it, further classifying it, monitoring and ‘treating’ it” (Sawicki 1991: 39). Therefore, biological knowledge production, sophisticated or not, is based upon the production of deviant entities that can be classified as such are used to consolidate the norm. Rosi Braidotti noted that “in the age of biopower the embodied subject is ‘cannibalized’ by the practices of scientific techno-apparati” (Braidotti 1994a: 47). Even though in Fausto-Sterling’s account an expansion of possible identity positions can be detected I argue that her proposal is part of a cannibalizing practice, since the assigned places of these possible

identity positions are defined by the “experts” medical diagnosis and reflect the imperative of sexual dimorphism according to the reproductive function of the individual.

In 2000, in “The Five Sexes Revisited”, Fausto-Sterling refers to her article “The Five Sexes”. She argues “that the two-sex system embedded in our society is not adequate to encompass the full spectrum of human sexuality” (Fausto-Sterling 2000b). Therefore, Fausto-Sterling now puts forward the emerging recognition that people come in “bewildering sexual varieties”, thereby testing medical values and social norms from a critical biologist’s view. She argues, in reference to the medical ethicist Laurence B. McCullough, that the various forms of “intersexuality” should be defined as normal. This is a step towards a less violating short-term solution. However, any process of normalization is an implement of power. Should we, therefore, not be more cautious with implicating and calling upon the norm? Fausto-Sterling reconciles with the ethicists’ demand that the treatment mantra should be therapy, not surgery. Fausto-Sterling gives clear instructions about how physicians should submit to ethical guidelines concerning patients’ rights and the informed consent-debate. Physicians should disclose everything to the parents; they should abandon their practices of treating newborns as a medical or social emergency, and they should minimize irreversible assignments. Nevertheless, the necessity of sex-assignment is not questioned by Fausto-Sterling; it should be done “on the basis of the probability that the child’s particular condition will lead to the formation of a particular gender identity” (Fausto-Sterling 2000b). She describes this “particular gender identity” as follows:

Gender identity presumably emerges from all of those corporeal aspects via some poorly understood interaction with environment and experience. What has become increasingly clear is that one can find levels of masculinity and femininity in almost every possible permutation. A chromosomal, hormonal and genital male (or female) may emerge with a female (or male) gender identity, or a chromosomal female with male fetal hormones and masculinized genitalia - but with female pubertal hormones - may develop a female gender. (Fausto-Sterling 2000b: 5)

Implicitly, Fausto-Sterling is in line with Stoller’s argumentation and naturalizes gender identity via “those corporeal aspects” that are pre-existent before socialization. Moreover, Fausto-Sterling’s notion of identity is clearly formed by the traditional gender identity paradigm construed by Money and Stoller, and it thus remains in the notion of the necessarily dichotomous formation of subject(ivities). The attachment of “sexual traits” to the development of identity places sexual dimorphism at the very heart of the formation of subject(ivities). Fausto-Sterling’s conception is that one can identify as either male or female.

Concerning the use of chromosomes for the designation of the identity of a person, Margriet van Heesch asked if maybe the knowledge about sex chromosomes are obsolete, since it is not the sex chromosomes which determine sex but “the countless genes and gene combinations residing in our 46 chromosomes that shape sex in countless ways” (van Heesch 2009: 143). Heesch hereby refers to Joan Fujimura who provided an alternative reading of the materiality of sex on the level of chromosomes. Her approach suggests that in “genetic sex determination, scientists used the social categories of ‘normal males’ and ‘normal females’ to design their experiments and protocols, and they reproduced these categories in their experimental processes” (Fujimura 2006: 74). Therefore, sex, “even at the genetic level, is a sociomaterial process and product” (Fujimura 2006: 75). In that sense, a male or female identity cannot follow from genes (or hormones) since they are messier than the social distinction between genders. Even the supposedly most scientific entities such as genes and chromosomes are interpreted by social beings who are culturally, geo-politically and historically situated. Their representation of so-called biological facts necessarily reflects their situatedness.

Fausto-Sterling’s political agenda, however also includes concern about the violence that intersexualized and transgendered people experience in a binary and heteronormative society. Fausto-Sterling’s practical advice concerning the elimination of the category of gender reads as follows:

The intersexual or transgendered person who projects a social gender what Kessler calls “cultural genitals” that conflicts with his or her physical genital still may die for the transgression. Hence legal protection for people whose cultural and physical genitals do not match is needed during the current transition to a more gender-diverse world. One easy step would be to eliminate the category of “gender” from official documents, such as driver’s licenses and passports, surely attributes both more visible (such as height, build and eye color) and less visible (fingerprints and genetic profiles) would be more expedient. (Fausto-Sterling 2000b: 7)

The intention here is to protect people from a violent society which is a very urgent issue concerning all the hate crimes which are committed constantly. However, the suggestion to identify people according to their fingerprints and genetic profiles is intrinsically problematic as has become clear in the last two decades also by the discourse on the new control societies. I argue that this mode of identification would not abolish the focus on sex. More importantly, it would carry the jeopardy of an even more rigid installation of the modes of bio-power. The biological apparatus that Fausto-Sterling calls upon here

actually threatens to become installed at the centre of socio-political organization. The more is known about the biological make-up of individuals, the more it is possible to control them politically. Fausto-Sterling's proposal of the "Five Sexes" does not promise the vanishing of oppressive gender norms and neither does a system of more sexes/genders guarantee greater freedom. I argue that simply adding "intersexuality", "transsexuality" or transgender as further categories does not challenge the concepts of male and female; the issue is to tackle the naturalization of dimorphic sex.

Fausto-Sterling's most recent and extensive volume, *Sexing the Body* (2000a), provides basic information on the construction of scientific knowledge. *Sexing the Body* is useful in its attempt to reveal the workings of biomedicine. Its techniques, its technologies, its most famous personalities, and, indeed, every detail of the complex scientific discourse concerning the body are addressed in this volume.⁸⁴ In *Sexing the Body*, Fausto-Sterling elaborately reveals how social paradigms disguise themselves in biological terminologies and how heteronormativity serves sex/gender assignment procedures. Fausto-Sterling's social-constructivist and biological analysis of medical categorisations of hermaphroditism/"intersexuality" provides essential information on how the biomedical establishment worked and still works. Moreover, her account represents a basic critique of the dominant empiricist and positivist scientific paradigm. Especially the author's new rejection of the traditional classification of intersexualized people as male, female, and true or pseudo-hermaphrodites provides a basis for de-pathologization (Fausto-Sterling 2000a: 50). However, the reproduction of the categorizations of recent bio-medical knowledge production in intersexualization prevents her from completely escaping the biomedical attempt to enforce pathological categorizations (ibid.: 51-53). Especially problematic reads Fausto-Sterling's compilation of the psychological outcomes of intersex-identified children raised in one of the two exclusive categories of male and female. The comments chosen to prove the either healthy or non-healthy psychological state of the adult almost exclusively refer to the (heterosexual) marital status of the person (ibid.: 96-100; 102-106). Fausto-Sterling also fails to question the success of surgical intervention and gives the impression of a (positively) developing and, therefore, progressive medicine. Nevertheless, she effectively illustrates the constitution of the powerful bio-medical discourses and investigations. She is also persuasive in showing how scientists' social backgrounds frame their results, discoveries, and their decisions about which experiments to perform. Fausto-Sterling examines a wide range of biological arguments and shows them to be unfounded for a variety of reasons. She exposes the degree to which socio-political ideologies shape and produce "pure" science, resulting occasionally in lives and sexualities ruined by the medical profession's tendency to violate the integrity of intersexualized children. Nevertheless, she still expands traditional notions of sexual classification and the determining fictions used to create these. I suggest, that sexual dimorphism as a viable feature of sex(ual) difference is not sufficiently tackled in her account and intersexualization occurs where heterorelational sexes/genders are reinstalled as normal. Sex, gender and sexuality, in Fausto-Sterling's account are approached from a critical sex studies perspective. However, I argue that whenever intersexualization is at stake, the naturalization of sexual dimorphism subtly enters the discourse, mainly because of the powerful influence of the heteronormative matrix, which produces notions of sexuality being a biological and natural incidence, behavior or feature in human nature.

Both Butler and Foucault agree that "sexuality" is the primary political field that necessitates both the normalization of sex and the gendered social order. Butler identifies this as the *heterosexual matrix* – "that grid of cultural intelligibility through which bodies, genders and desires are naturalized" (Butler 1990: 151). Butler, in her crucial contribution to the debate, *Gender Trouble*, states that "there is no gender identity behind the expressions of gender" and that "identity is performatively constituted by the very 'expressions' that are said to be its result" (ibid.: 33). Instead, Butler argues that gender is *performative*, meaning that the sexes have no intrinsic, ontological validity, and that gender is not a natural part of a person but something they have to constantly enact according to the norms. She states that "the notion that there might be a 'truth' of sex, as Foucault ironically terms it, is produced precisely through the regulatory practices that generate coherent identities thorough the matrix of coherent gender norms" (ibid.: 17). Transposing the Nietzschean idea that there is no "doer behind the deed", Butler argues that there is no gender identity behind the expressions of gender; identity is constituted by and through the very expressions that are said to be its results. Or in Butler's own words, "gender is a matter of doing and its effects rather than an inherent attribute, an intrinsic feature" (ibid.). Butler's reconceptualization of gender as "performative reiteration" opened up new possibilities that had been foreclosed by the uses of the gender-concept and its inherent sex/gender distinction. Butler's theories of *performative subjectivity* provide a powerful set of explanations of the ways in which subject(ivities) are constituted through discourses and cultural technologies like bio-medicine. *Gender Trouble* effectively places the neutrality and naturalness of the biological body in question and offers an entirely new theoretical framework for thinking about gender and

⁸⁴ Fausto-Sterling uses *development systems theory* (DST) in this volume. This enables her to depict the body as biological but also tightly bound to environmental factors. DST is based on three basic principles: 1. nature and nurture are indivisible, 2. organisms are active processes (all throughout life), 3. no single academic discipline can tell the truth about human nature (and human sexuality) (Fausto-Sterling, 2003: 235).

identity, namely as ritualized repetition. Butler's claim to think of sex only in terms of gender has definitely fostered the deconstructive enterprise.

Butler herself however, realized that she might be misunderstood in this claim and has distanced herself from a purely constructivist view in her subsequent volume *Bodies That Matter* (Butler 1993). Butler here tackles the challenge to approach sex from a radical constructivist position. She describes this jeopardy as follows:

When the sex/gender distinction is joined with a notion of radical linguistic constructivism, the problem becomes even worse [compared to gender as a term that absorbs "sex"] for the "sex" which is referred to as prior to gender will itself be a postulation, a construction, offered within language, as that which is prior to language, prior to construction. If gender is the social construction of sex, and if there is no access to this "sex" except by means of its construction, then it appears not only that sex is absorbed by gender, but that "sex" becomes something like a fiction, perhaps a fantasy, retroactively installed at a prelinguistic site to which there is no direct access. (Butler 1993: 5)

Therefore, it is the matter of sex, which needs to be addressed. The questions she addresses in *Bodies that Matter* are therefore concerned with this matter of sex and the normalizing forces which produce this matter:

To claim that sex is already gendered, already constructed, is not yet to explain in which way the "materiality" of sex is forcibly produced. What are the constraints by which bodies are materialized as "sexed", and how are we to understand the "matter" of sex, and of bodies more generally, as the repeated and violent circumscription of cultural intelligibility. Which bodies come to matter – and why? (Butler 1993: xi, xii)

For Butler, the biological body is a social body from the very beginning. For her, the body is only accessible through the layers of discourse that surround it. The body is the norm that becomes materialized through the citation of normative and symbolic laws. Because it is subjected to the symbolic order, the body materializes as a social entity. The body is the effect of norms; moreover, the symbolic order and society in general materialize in and through the body. Through the performative reiteration of normative bodies, their shapes, their pictures, their perception *and* their morphologies are produced. Materiality is therefore nothing else than the materialization of norms. In Butlerian parlance, the body is the product of power and its technologies and practices. The body is not natural and, therefore, no body can be unnatural. Nothing about bodies can be named natural, not even its inevitable mortality (even this is arguable since the development of technological practices such as cryogenics and gene therapies). In her subsequent works, Judith Butler was concerned with the theorization of the social body beyond the essentialism versus constructivism debate (e.g. 1997, 2003). However, her approach has been criticized by those feminists who work on the materiality of the body mainly from philosophical perspectives inspired by Gilles Deleuze and Felix Guattari (2004a, b). Deleuze and Guattari develop a new understanding of materiality and immanence. I cannot provide a comprehensive insight into their theories here; however, I will provide a brief example on how Deleuze and Guattari approach sexuality. In their book *A Thousand Plateaus* Deleuze and Guattari propose a different reading of sexuality, by arguing that it "is badly explained by the binary organization of the sexes, and just as badly by a bisexual organization within each sex. Sexuality brings into play too great a diversity of conjugated becomings; these are like n sexes" (Deleuze and Guattari 2004a: 307). They hereby foster the notion of an unlimited difference in human existence and the impossibility of applying a system of two or three or any number less than n . This n -th degree of the different possible materializations of a sex-gender-sexuality system indeed dissolves any category which could be applied. 'Humanity' or 'human nature' as Deleuze and Guattari argue, is an underlying, sexless essence that is then boxed into different bodies and identities. In Deleuze and Guattari we also find the notion that embodiedness of the subject is a form of bodily materiality, albeit not in terms of a biological substance or essence. For them the body is the complex interplay of exceedingly constructed social and symbolic forces. As I stated above, I do not engage with this debate here, yet I do wish to provide the reader with some tags that I regard as promising in regards to an intervention into intersexualization.⁸⁵ Elisabeth Grosz, known as a corporeal feminist, was the first to provide an analysis of the sexed body as a living and experiencing entity in her volume on *Volatile Bodies* (1994). Grosz argues that the body is not a brute, passive, or inert object merely inscribed by social forces, but rather that it is created through the mechanism of already established social systems of representation, meaning, and signification. As Grosz puts it, for corporeal feminists, "the body can be seen as the crucial term, the site of contestation, in a series of economic, political, sexual and intellectual struggles" (Grosz 1994: 19). Therefore, these struggles emerge in and as bodies and their materiality. This approach denotes a different perspective on biological knowledge production and has caused feminist scholars to engage with the possibilities of reclaiming phallogocentric

⁸⁵ For a comprehensive account on the new materialist feminists see Iris van der Tuin 2008. Van der Tuin refers to scholars such as Claire Colebrook, Sarah Ahmed and Karen Barad as materialist feminists.

knowledge production in the natural sciences. The social-constructivist approach by feminists who relied upon Robert Stoller's constructive essentialism is increasingly abandoned while new narratives of the body, sexual difference and materiality enter the feminist discourse. Moira Gatens, also critical of a purely constructivist approach to the body, states that "the idea that the world is constructed through language merely repeats a centuries-old privilege of the formal and logical over the material" (Gates 1996). Most feminist materialists who are in some way the prolongation of "corporeal feminism" in their thinking have in recent years stressed that there cannot be simple material notions of life. This new approach to the body is marked by the call for thinking the body beyond the problem of representation because there is no original body that could be represented. These new feminist approaches to the body stress difference on all levels. These material feminists argue that evolutionary change occurs not in a mechanical manner as has been widely believed and worked with. Colebrook states that "if there is an evolutionary imperative at the heart of our emotional and rational tendencies, then this is not because of hard-wiring but because the brain is adaptive and dynamic" (Colebrook 2008: 53). Colebrook, who works with Bergson, sees life as the production of difference and the responsive and dynamic relation among differences. Life, according to her, should also "not be conceived as matter, for matter is nothing more than the relatively stable form taken on by a life that is truly and fundamentally a potentiality for change" (ibid.: 54). What follows for Colebrook here is a "material politics" which consists of two movements: one is the recognition of how life has unfolded historically to produce the relations we are living in, and the second is that the freedom from these relations can only be achieved through recognition of our materiality. With regards to the production of a dichotomous system of the sexes this means that there is a need to acknowledge the material history of how this has been produced but also and importantly that the "refutation that such a history is inevitable" (ibid.). For Colebrook it follows that "our biology can and should be lived otherwise" (ibid.: 64,5). For Elizabeth Wilson this means that the politics of biology have to be thought "as it is, rather than as it is mediated" and that the more "positive and productive vicissitudes of biology" have to be taken up (Wilson 1998: 54, 62). In contradiction to the traditional, patriarchal and sexist and deterministic conceptualization of the human body as binary and complementary, the new feminist materialists argue that "the matter of the human body is just that which can *give itself* any form whatever" (Colebrook 2008: 79). Luciana Parisi's material feminism is articulated through recognizing modern technology. She states that "if molecular biotechnology is already detaching femininity from the imperative of sexual reproduction and genetic sex then why would a notion of femininity be relevant to the body politics?" (ibid.: 81). This is a call for a body politics that links the new material feminists to the notion of gender identity. If bodies are no longer divided by the "reproductive imperative", the concept of sexual identity, or in Stoller's sense, gender identity becomes obsolete. And not just this becomes obsolete but according to Rosi Braidotti, who describes Deleuze's and Guattari's approach to identity, the "very concept of identity, with the inbuilt logic of recognition of sameness and dualistic relocation of otherness, which has been operational since Plato's time" (Braidotti 2005: 16). With this Braidotti touches upon the tendency towards non-dialecticism in feminist materialism and invokes a basic reorganization of Western thinking. Braidotti reasons that with a Deleuzian approach "the emphasis shifts from the metaphysics to the ethics of sexual difference" (ibid.). With regards to intersexualization this is of course a foundational claim since sexual difference organized as sexual dimorphism is the phantasm which produces the violent effects on intersexualized bodies and identities. With Grosz, Colebrook argues for a new "thinking of the body *neither* as a pre-representational surplus *nor* as a determining essence. The question is not one of *how the sexes are differentiated*, but rather: *are there different modalities of sexual differentiation due to the specificity of different bodies?*" (Colebrook 2000 emphasis in original; Grosz 1994: 189). In the light of my argument that the sex-gender distinction was invented in intersexualization this approach seems promising for future interventions into intersexualization. This dissertation, however, focuses on the historicization of the processes of intersexualization and does not intend a philosophical interrogation of sexual difference.

Sexual difference, as implying sexual dimorphism and biological determinism, I argue, still needs to be convincingly historicized by correlating the constructions of other differential modes of human bodies; the interplay of social and symbolic forces which, in their interplay, produce multiple vectors of power and hierarchy. Several modes of differentiation take part in the construction of bio-medical knowledge. The categories of white, black, poor, rich, ablebodied, old and young, for example, play a significant role in enabling biology to speak at all. The language that mediates "scientific experiments" is a reverse and circulating process of power. Analogies of race and sex(ual) difference are mediated by evolutionary tropes such as *maturity*, *development*, *degeneration* and so forth, as I elaborate in section 2. Numerous concepts of the sex(ual)ized/gendered body and the "racially" different body, i.e. the racialized body, could not be made intelligible without a circular system of references and metaphorical analogies. In de-constructing sex(ual) difference the symbolic order, power relations, technologies, psychology, linguistics and daily-life-interactions and the meaning of matter cannot be left aside.

Conclusion

Feminists have eagerly taken on the distinction between sex and gender from Stoller's publication in 1968. Since then, numerous attempts to overcome the constructivist essentialism, which is inherent in the gender-concept, have been undertaken (most prominently Butler 1990). In this chapter I demonstrated how intersexualization prefigured future research into sex, gender and sexuality not just by non-feminist psychologists, psychoanalysts and bio-medical researchers, such as neurologists and endocrinologists, but also by feminist researchers. However, especially in critical feminist biology, convincing approaches to the de-essentialization of sex(ual) difference were developed. Yet, when it comes to "intersexuality", problems in conceptualization remain. In the light of my argument that the gender-concept was invented in intersexualization, I contend that the distinction of sex and gender is intrinsically connected to the continuing effort to align the two categories through surgical and/or therapeutic intervention. Moreover, with regards to feminist and queer theoretical engagement with the gender-concept, the fallacy of the easy deconstructability of sex always re-enters through the back-door. The heteronormative bias, which is implicated in the binary constructions of sex and gender *and* their distinction, has made theories that avoid reinstalling the pathology of sex-gender-incongruence difficult, yet not impossible.

The politicization and historicization of knowledge production in the discipline of biology from a feminist perspective was clearly enabled by the distinction between sex and gender. The work by critical feminist biologists has been indispensable and has powerfully deconstructed the alleged "objectivity" of the knowledge productions of bio-medicine. A number of inherently patriarchal and sexist tautological arguments have been dismantled and sex(ual) difference as a biological imperative has been weakened by the critical feminist biologists' work. However, the separation of sex and gender fostered a division in academia that reinstalled the split. And I am much inclined to accept Toril Moi's statement that a useful understanding of the body and subjectivity is not to be achieved if we remain in the notion of a biological body and a psychological subjectivity (Moi 1999). Of course, theorists in the Butlerian tradition of handling sex as already gendered have provided accounts that can overcome the distinction, but in regard to intersexualization the distinction usually prevails. With my critique of Fausto-Sterling's proposal of the "Five Sexes" I demonstrated the pitfalls that stem from a reference to dichotomously conceptualized human biology and a belief in the production of "sophisticated knowledge" that could tell us the truth about the supposedly natural organization of bodies and identities. In Fausto-Sterling's account this occurs via a suggestion of reproductive structures as the indicator for identity. Unsurprisingly, her account fails to engage with sexual orientation apart from her inference of heteronormativity. I have shown with the example of Fausto-Sterling that feminists who engaged with the trope of intersexualization while choosing to use the distinction between sex and gender reinstall essentialist notions. Dichotomously thought sex(ual) difference enters the narratives on the body even though researchers try to avoid reinstalling binary heteronormative concepts. Although gender was able to do an immense work for feminists interrogating the interconnectedness of gender with other categories such as race, ethnicity, age and so on, sex was difficult to not imply in the use of the category of gender. I very briefly touched upon the new approaches by materialist feminist to the materiality of the body and the knowledge productions in bio-medicine. I argued that their reconfiguration of biology within a philosophical framework is highly promising also in regards to intervention into intersexualization. The interconnectedness of the construction of sexual dimorphism and other differential modes in biology such as age, able-bodiedness and ethnicity however, need to achieve attention in the historicization of sexual difference as sexual dimorphism.

Conclusion Section 1

In this section on the Clinic I focused on specifically crucial moments in intersexualization since the 1950s. In the first chapter, I analyzed the publication series by John Money and his collaborators John and Joan Hampson from 1955 to 1957 and partly also Money's later work. In these accounts, the new treatment paradigm of the optimum gender of rearing was established. Infants were from now on intersexualized through being called "psycho-sexual emergencies" which allowed the researchers to advocate surgery in the first eighteen months of live. I demonstrated how the researchers ignored their own findings of the absence of psychopathology in their sample of adult patients and pursued to advocate the paradigm of a gender role that can only develop as stable feminine or masculine if in the child's body the genitalia are surgically aligned to the dichotomous notion of "esthetic" functionality. Furthermore, I outlined the underlying psychoanalytical concepts Money et al. read selectively to support their treatment mantra. I focused hereby on the Freudian concept of innate biology and the theory that a woman can only become

sexually mature, if she transfers her sexual responsiveness from the clitoris to the vagina. The emphasis these researchers put on the creation of heterorelational monosexualities is still present in the contemporary medical establishment's focus on surgery. By positioning human hermaphroditism as an original stage of psycho-sexual development, the development into an either male/masculine or female/feminine stable gender role and identity appears as the only possible, healthy and mature form of becoming a subject. These researchers examined here pursue the agenda to create "normal", marriageable and neatly gendered subjects.

This becomes especially clear in the new nomenclature of DSD, which underlines the notion of unfinished development; the surgeon will "finish" the child's body to fit the clear-cut binaries of sex and its prolongation of gender. With this analysis, I reasoned that the definition of "intersexuality" as pathology is immersed with the tropes of gender role, gender identity and heterosexual orientation. The invention of the gender-concept with its inherent distinction between sex and gender reflects the essentialist, yet also constructivist notions that are implicated in the distinction between a biological sex and a cultural or social gender. My contention is that this distinction is one of the most prominent features of intersexualization. The biological and the social/cultural categories have been separated in an analytical endeavor only to be surgically reunited.

What I have shown in this section is the paradoxical rhetoric that has produced the gender-concept. While the underlying assumption of sexual dimorphism has shaped all approaches to psychological and social factors that may contribute to human subjectivities, a specific rhetoric was needed to uphold this very hypothesis. As far as I understand the development of these theories, they are nourished by two distinguishable modes of rhetorical gymnastics. First, there is the presupposition that there are but two sexes, which are clearly distinguishable from each other and second this needs to be verified by the "deviant". In Foucauldian terms the "deviant" as the "pathological" serves to establish the notion of the "normal" and vice versa (Foucault 1977, 1978). This move also becomes clear in Robert Stoller's work on core gender identity. That which does not align to the logic of a heterorelational separation is deemed pathological, degenerate and abnormal. I demonstrated in my analysis of Stoller's work in chapter 2 that intersexualization builds on these tropes in psycho-medical research to justify treatment. In Stoller's research I traced the shifts in reference to either biological or psychological forces which disguise the move toward the essentialization of both in regard to a dimorphic biological and psychological nature of human subject(ivities). The combination of biological and psychological vocabulary later led to an analogical relation of nature and nurture always thought of as heterorelational. In intersexualization the distinction *and* the intertwining of psychological and biological theories leads to normalizing process. Stoller, also an advocate of surgery, however, after realizing that his postulated biological force which causes either the feeling of being female or male does not account for transsexual(ized) people had to revamp it. He drew upon the oedipal trias to designate the source for the "abnormal" thereby reinstalling masculinity as the achievement of civilization. Furthermore, he realized that there are people who cannot be understood in the framework of a bifurcated biological force, so he created a trifurcated biological force, thereby arguing for a hermaphroditic identity, which is by him designated to be "abnormal". Stoller's biological determinism shows in this conceptualization of a trimorphous basis of a male, female and hermaphroditic core gender identity. Herdt later applies Stoller's theories to anthropological research in other cultures, as I show in section 2 on the Colony.

In the third chapter on critical feminist intervention into the essentialization of sex I show how feminist scholars have eagerly taken up the gender-concept. The merits of the gender-concept in socio-political and cultural analysis cannot be denied, however, I emphasized that the genealogy of the gender-concept needs to be considered in the application of it. By focusing on Anne Fausto-Sterling's proposal of the "Five Sexes" I analyzed how feminist biology is sometimes complicit in intersexualization and continues the heteronormative imperative as well as biological determinism. Recent feminist interventions by namely Judith Butler and the new materialist feminists tackled biological knowledge production from different angles and started reclaiming the discourse of biology and materiality from phallogocentrism. There has never been an agreement on what really determines sex and/or gender, and there probably never will be. Sex and gender are phantasms that haunt researchers – there is no secret to be discovered in any body or mind – sex and gender only exist because of the quest for them. However, the intersections between gender, sex and racializing and ethnicizing discourses need attention when an analysis of the power intrinsic in (biological) knowledge production is at stake. In the section on the Colony I attempt such as analysis, albeit focused on the epistemic violence which anthropological research exerts when it goes cross-culturally to intersexualize.

Section 2: The Colony

Introduction Section 2

In this section I interrogate the theoretical space that I demarcate as the Colony in the processes of intersexualization. I argue that in this space, anthropological accounts produce cross-cultural intersexualization by interpreting and organizing bodies and identities in other cultures according to Western systems of knowledge. The representation of hermaphroditism/“intersexuality” in the other culture in clinical, bio-medical and psychoanalytical research is subjected to a twofold process of othering: on the level of the subject and on the level of culture.

Marilyn Strathern noted that as a feminist researcher one's relationship to anthropology is already “awkward” (1987). To her, even though feminists and anthropologists share an interest in differences, the scholarly practices are “differently structured in the way they organize knowledge and draw boundaries” (Strathern 1987: 289). Feminist thinking has contested anthropology as buying into hegemonic, exclusive and oppressive discourses and practices. In feminist scholarship, dichotomies such as center/margin, other/self speaker/spoken-about nature/culture and so on, are the center of attention. The construction of the other has become a central issue in feminist thinking. As Coco Fusco states:

The issue of ‘the other’ is one of power, of a dynamic between those who impute otherness to some and those who are designated as other. So the questions I ask about otherness have to do with how others or the other are spoken of, who is speaking about them and why they have chosen to speak of the other at the given historical moment. (Fusco 1990: 77)

The subject of this section is the relationship between self and other that is differently experienced, interrogated and theorized in anthropology. The attempt to see the world through the lens of people different from ourselves has been central to anthropology; yet who is “ourselves” and therefore, who is the “other” and what makes “them” different and how? Questions such as these as well as associated questions of power and representation have always been posed to and by anthropologists and will be addressed in this section (Rabinow 1996; Probyn 1993; Spivak 1989). Anthropology and its sub-disciplines and methods have experienced major revisions during the linguistic, pictorial and postmodern turns (see e.g. van Loon 2001; Spencer 2001; Clifford and Marcus 1986). Feminists have been especially critical of ethnography, arguing that it is a traditionally masculinist methodology and interest (Mascia-Lees 1989, 2000). Located in this tradition, in this section I map out and draw together the different preconditions upon which anthropologists and collaborators from the disciplines of endocrinology and psychoanalysis, base their truth claims about the other. I interrogate the language that is applied to formulate these claims and pose questions about the translatability of the cultural and symbolic system of the other culture. I ask the questions of who has when decided to speak about “intersexuality” in the others and with which concepts in mind.

In this section I look at the collaborative works of four prominent researchers in cross-cultural intersexualization. My aim is to identify the narratives and modes of representation, which occur in their works. By interrogating the roles of these researchers in the disciplinary interconnections of anthropology, sexology, psychoanalysis and bio-medicine, I also reflect on the historical origins of these disciplines.

The central figures I chose as an example for the process of cross-cultural intersexualization, as I call it, are Gilbert Herdt, an anthropologist, and Robert Stoller, a psychoanalyst from Berkeley; both are well-known academics in their fields, and pioneers for different reasons.⁸⁶ Herdt, famous for his research in Papua New Guinea created the concept of ritualized homosexuality and became also interested in “intersexuality”. As one of the first anthropologists to publish material on sexuality, he invited Stoller, and Julian Davidson, an endocrinologist, to join him in the field in Papua New Guinea to conduct research. Their research is exemplary for the implications of ethnography as a method, and, specifically, for the design of clinical anthropology as a method to combine psychoanalytical and bio-medical knowledge productions. The collaboration between Herdt and Davidson is partly based on the research conducted by Herdt and Stoller, yet supplements the psychoanalytical research with bio-medical data.⁸⁷ Robert Stoller later also conducted research on “intersexuality” in the Dominican Republic where he assisted the physician Julianne Imperato-McGinley. I suggest that their collaboration can be read as the use of the other - the colonized body and self - for the production of knowledge for the West. I argue that can be

⁸⁶ Herdt was not the first one to interrogate hermaphroditism/“intersexuality” in other cultures. One of the most famous examples of Robert Edgerton who conducted research in East Africa (Edgerton 1964).

⁸⁷ The truth claims, which come with data compiled by the hard sciences traditionally have a higher potential (in the West) to be accepted as objective and are therefore less vulnerable to accusations of partiality or positionality (Franklin 1995). I will not expand on this discussion; however, I demonstrate how bio-medical research adds to the colonizing process in regards to the universal truth claims of Western knowledge production in the hard sciences.

interpreted as a neo-colonial feature in modern anthropology. Furthermore, the imposition of meaning that is at work here reflects not just Western truth claims but also how these are executed and thereby colonize the symbolic system of the other culture. The construction of the other in the other, mainly through the construction of a third sex and/or third gender, that I see at work in this kind of medical anthropology completes the picture of this small time frame of about 20 years; additionally, it highlights this rather specific but influential interdisciplinary anthropological research into “intersexuality”. In the excursus I briefly touch upon research that has been occupied with the trope of the Third, such as the North American *berdache*. I argue that indigenous movements, such as the Two-Spirit movement, can counter the neo-colonizing aspects of anthropological research in so-called third sexes/genders. I look into the possibilities of undermining colonization by Western sex-gender-sexuality-systems in a third space that is characterized by difference and composition.

A critical stance towards the use of psychoanalytical concepts in cross-cultural research provides the backdrop to my readings of the notion of *development*. In the last chapter I focus on the use of the concept of the polymorphous perverse in Herdt’s work, which he used to describe the sexuality of the other. I trace the heritage of these discourses in the disciplines of anthropology that merge into cross-cultural intersexualization at the end of the 20th century. Hereby, I map out the discourses of psychoanalysis and sexology and their intrinsic evolutionary framework. By mapping out how 19th century sexology construed the the homosexual and/or the hermaphrodite as “invert” and as abnormal in regards to sexual dimorphism as the achievement of civilization I show how this has been done by analogy to racialized discourses which position non-Western cultures as primitive and less developed. Of specific interest is hereby how racial and sexual analogies have been employed to construct the fifth other through cross-cultural intersexualization. In concluding this section I reflect on the relationship between the Clinic and the Colony.

4. Clinicalizing the Other

Introduction

In this chapter I analyze an interview that the anthropologist Gilbert Herdt and the psychoanalyst Robert Stoller conducted with Sakulambei, a Papua New Guinean Shaman in 1985. I first map out the disciplinary background in anthropology and the study of sexuality as well as Papua New Guinea’s place in this. I show that Papua New Guinea had a certain status for anthropological research into sex-gender-sexuality-systems since it has been regarded as an example of a primordial formation of human societal organization. The specific place that Papua New Guinea has inhabited for some decades now in anthropology is discussed in relation to the construction of a geographical, historical and cultural other. I interrogate the relationship of the researchers to each other and their respective disciplines by shedding light on the developments in anthropology in relation to other disciplines. With the influence of poststructuralism anthropologists started working interdisciplinary. I provide insight in this context of the newly created method of clinical ethnography, which Stoller and Herdt apply to conduct the interview. Special attention is paid to underlying assumptions and constructions of self and other in this interview. An interrogation of the use of pseudonyms and a specific method of translation as well as the stressing of hierarchies between participants dismantles the axis of power along which cross-cultural intersexualization works. With clinical ethnography applied by Robert Stoller and Gilbert Herdt, the interview with Sakulambei leads to a diagnosis, which shows that cross-cultural intersexualization, is based on specific normative notions of sex, sexuality and gender, which precede the gathering and the interpretation of anthropological data. Moreover, the methods by which the researchers interrogate their interviewee/patient reveal that they pathologize and silence Sakulambei in the process of interrogating him. When the researchers finally diagnose what they presumed to be the case in the first place, I demonstrate the power of the gaze of the clinical anthropologist who is looking at the other. I argue that the positivism that is intrinsic in this mode of research reflects a double projection of pathologization and medicalization interlinked with the normative Western gaze and uses of language.

4.1 Anthropology and the Clinic

Anthropology could also be described as the science wherein knowledge on the concept of the “human being” accumulates. Cheris Kramarae and Dale Spender state that anthropology is the “discipline that seeks to explain cross cultural variation in human behavior, and it takes as its subject matter the span of human cultural behavior across time and space, focusing traditionally – although [recently] not [any longer] exclusively- on social groups that do not or did not maintain written records” (Kramarae and Spender 2000: 65). It is in anthropological research where psychology, medicine, ethnography⁸⁸ and other disciplines amalgamate to formulate “holistic and comparative” knowledge on humankind (Brown 1998: 1).⁸⁹ Knowledge emerging from this kind of study is subject to its temporary and spatial environment: to political, cultural and social codes and methodological traditions.

The interest of anthropologists in the organization of sexuality in other societies has a considerably long history. While establishing anthropology as a separate and academic discipline, early anthropologists became aware that sex-gender-sexuality-systems are basic forms of societal organization. Anthropological scholars, however, had to wait until the 1960s to be able to include research into sexuality to their agenda. For a long time, sexuality was taboo in anthropology. In 1986, Joseph Carrier states that “few anthropologists have had the courage to study human sexual behavior in other cultures as a major focus of their research; even fewer have had the courage to study highly stigmatized homosexual behavior” (Carrier 1986: xi). The American Anthropological Association (AAA) did not acknowledge the importance of sex research in anthropology until their annual meeting in 1961 when a plenary session was held exclusively to human sexual behavior (see Gebhard 1971: xiii). In 1974, the AAA sponsored a historic symposium on homosexuality in Mexico City where a well organized group of anthropologists started initiatives such as publishing journals and organizing symposia and conferences on the issue of (homo)sexuality in anthropology.

However, at the beginning of the 20th century, the anthropological pioneers Margaret Mead and Bronislaw Malinowski already studied systems of sexuality and gender in Papua New Guinea, laying the grounds for later studies, not just in methodological terms but also in terms of the general development of the discipline of anthropology/ethnology. Malinowski’s and Mead’s findings, along with other ethnological findings, were thought to challenge the supposed universality of the heteronormative and dichotomous orders of Western societies. Malinowski’s central (and most discussed) point was that the Oedipus complex is not universal. He thereby questioned the applicability of psychoanalysis in cross-cultural contexts (Malinowski 1927, 1929). His argument was based on his research in the Trobriands, an island group, which belongs to Papua New Guinea, where a matrilineal society organizes family and gender structures. Margaret Mead’s work in the same geographical area circled around the question of whether the differences between the sexes/genders were culturally determined or innate (Mead 1930, 1935). Harriet Lyons and Andrew Lyons state that it was Mead’s failure that “she was attempting to define, through cross-cultural comparison, not merely a sensible sexuality but a female sexuality as well” (Lyons and Lyons 2004: 205) and hereby Mead implied an exclusive, normal and universal notion of what female sexuality “really” is. This desire to find the “reality” or “truth” of an intrinsic and natural sexuality, be it male, female or human in general exposes the universalizing impetus of cross-cultural/anthropological research into sexuality.

Mead’s and Malinowski’s research in Melanesia and Papua New Guinea and ethnographic writing about this geographical area informed many of anthropology’s central paradigms in the 1970s and early 80s, (see Josephides 1991: 145). Most of these anthropological accounts have especially dealt with sex, gender and sexuality. Because of its cultural diversity of linguistic and cultural features, Melanesia and New Guinea had a special place in the anthropological understanding of human cultural variation.⁹⁰ Bruce Knauff described Melanesia as a vibrantly changing world area, and anthropology as a vibrantly changing discipline (Knauff 1999: 3) which makes the relationship between the two highly complex. In an issue of *Current Anthropology* of 1993, Terrence Hays and his respondents reflect on the distinctions between the High Lands and the Low Lands of Papua New Guinea and controversially discuss and categorize Papua New Guinea as a “fuzzy set”. Some anthropologists stress that these determinations imply homogeneity and are therefore misleading in terms of essentialist notions of a highly diverse region (Hays et al. 1993). Since the first colonialist arrived in Papua New Guinea the resulting ethnography on this region tended to

⁸⁸ In the US-American context biology, linguistics and archeology are also disciplines compartmentalized in anthropology.

⁸⁹ To define anthropology is not an easy task and I have chosen to use the broadest definition I could find. Dell Hymes in *Reinventing Anthropology* in fact asks the following question about anthropology: “why does its makeup differ so much from one country and national tradition to another, even from one department to another?” (Hymes 1969: 3). Hymes emphasizes the impossibility of giving an exact definition by referring to the differences in the choice of subject, make-up of institutions, methods and so on which can be subsumed under the term “anthropology”.

⁹⁰ The New Guinea region is a linguistically highly diverse region with about 1000 languages in an area smaller than 900,000 km². The languages in the region are spoken by an average of only 3000 speakers spread over 10–20 villages. None of these individual languages has emerged as numerically or economically powerful enough to hinder linguistic diversification (Foley 2000).

suspend subjectivity and replace it “by a plethora of particular, separate, and impersonal beliefs and customs” (Knauff 1994: 400) such as ritualized homosexuality (the term was coined by Herdt in 1984). Knauff furthermore states that this ethnographic work arranges native customs “in neat institutional categories” (ibid.). Knauff lists more than 20 different researchers who have conducted field work on gender and sexuality in Papua New Guinea, among others Herdt (Knauff 1999) and postulates that Papua New Guinea can be described “as an object of Western epistemic gaze” (Knauff 1994: 396). Herdt’s extensive ethnographies on Papua New Guinean culture are well-known and greatly influenced future ethnological publications. In Herdt’s work two different strands of anthropology merge: medical anthropology and psychological anthropology, which are formed into clinical ethnography (Herdt and Stoller 1990).

The researchers: Herdt and Stoller

In 1975 Gilbert Herdt was working as an anthropology PhD student in Papua New Guinea. Herdt had studied with Derek Freeman and Roger Keesing at the Australian National University. He also had established mail contact with Georges Devereux and other (psychological) anthropologists. Herdt received his Ph.D. in Anthropology from the Institute for Advanced Studies at the Australian National University in 1978. Herdt worked with the Sambia (a pseudonym), a people of the Papua New Guinea Highlands. Herdt realized that eroticism and sexuality were central to his work in the field, and, therefore, felt that he required guidance from a psychologist. He heard of Robert Stoller, whose expertise was already in sexology as a psychologist, and started writing mainly notes from the field to him. Stoller became interested and invited Herdt to the University of California, Los Angeles, to become a postdoctoral fellow at the Neuropsychiatric Institute. In 1983 Stoller joined Herdt in Papua New Guinea to conduct clinical ethnography. This was the beginning of long-lasting teamwork that would end with Stoller’s death in 1990 when their last collaborative work was published. From 1978-85 Herdt was a member of the Gender Identity Research Clinic which was part of the NPI at the University of California, Los Angeles. In 1979 he received a Post-doctoral Certificate in Psychiatry at the Neuropsychiatry Institute at the University of California, Los Angeles. Herdt is Professor of Human Sexuality Studies and Anthropology and Director of the National Sexuality Resource Center since 2002 at San Francisco State University, California. He has taught at Stanford University, the University of Chicago, the University of Washington and the University of Amsterdam. He is associate editor of the *Journal of Culture, Sexuality, and Health*, the *Journal of Men and Masculinities*, and *Transaction: Journal of Social Science and Modern Society*. He has published widely on the anthropology of sexuality in the USA and Papua New Guinea.

Robert Stoller wrote several books and numerous papers on the topic of human sexuality, namely on “intersexuality” and on transsexuality (see chapter 2) but also on transvestism, erotic imagery (pornography), sado-masochism as a pathological expression of sexuality⁹¹ (as distinct from SM practices and subsequent self identification of members of a subculture), and homosexuality, usually from a psychoanalytic viewpoint. He also was a member of the Psychoanalytic Research Society. Stoller and Herdt co-published a range of ethnological studies on gender identity in non-Western societies (e.g. Herdt and Stoller 1990; Stoller and Herdt 1985). Their special relationship is analyzed later on. Stoller’s early theories used the assumption of a biological force as a weapon to defeat the theories of gender role by John Money (chapter 1) (Stoller 1964). Stoller essentialized gender identity by assuming a biological force to be responsible for one’s self-image as male or female (see chapter 2).

In a 1987 article entitled “Der Einfluss der Supervision auf die ethnographische Praxis” (The influence of supervision on ethnographical practice) (Herdt & Stoller 1987) Herdt and Stoller reflect on their academic relationship and its influence on the development of the concept of clinical ethnography. This new method was influenced by Stoller’s supervision of Herdt’s fieldwork from the perspective of a psychiatrist and psychoanalyst. They describe, for example, how Herdt learned to overcome his own misogynist attitude towards the Sambian women by following Stoller’s advice to engage with them. In this article Herdt mainly mentions his rising awareness of how he himself influences the set (and also the settings) of his fieldwork. He does not explain the modes of the new method he invented. However, the article is indeed as it claims rather “ethnography of a supervision” than a reflection on ethnographical practice itself (Herdt and Stoller 1987: 193). Because of the hierarchy between Stoller and Herdt through their age difference and the institutional hierarchy between them (Stoller was the professor, Herdt the research fellow) the exerted influence was quite unidirectional. In 1990 Stoller and Herdt publish *Intimate Communications* in which they describe at length how their relationship has grown and how their clinical methods developed subsequently; indeed, they announce in the preface that they “use [their] ethnographic dialogues to rethink method” (Herdt and Stoller 1990: ix). They first started to “rethink method” in the late

⁹¹ SM as being reclaimed from the medical establishment not in the sense of a pathology as Stoller continuously portrayed transvestism, pornography, transsexuality, etc (e.g. Stoller 1970, 1975, 1978)

1970s: time in which anthropology and ethnography in particular were intensely scrutinized from the outside but also by anthropologists themselves. Under Stoller's influence, Herdt began to conceptualize his relationship to his informants in terms of a psychoanalyst-psychoanalytand interaction. Through Stoller's visit, Herdt realized that what is happening between him and his interviewees/analytands/ethnographed could be described as *transference*, a psychoanalytical term for the reproduction of emotions (commonly conceptualized as unconscious childhood experiences) onto another person. Characteristically, the concept of *countertransference* where the interviewer/analyst/ethnographer transfers his feelings onto the other is not mentioned. This feeds into the one-way conceptualization of influence from the West onto the other, positing the anthropological subject's "objective" gaze as pure and "truthful", uninfluenced by the field experience.

Anthropology uses ethnography as its method to compare and analyze the different formations of culture and subjectivity. The linguistic turn and poststructural theories were the initial stimulators for a general rethinking of method in ethnography. Many anthropologists re-articulated the aims and methods of anthropology because of the "epistemological break" that occurred (e.g. Rabinow 1986; Marcus and Clifford 1986). Hand in hand with these new impulses came a new interdisciplinarity, which meant that anthropologists started to collaborate with or receive training by physicians, psychologists, psychoanalysts, biologists and so on. The gathering of data in an interdisciplinary manner had been fostered by various discussions in the anthropological community. From the beginning of the 1950s, and the emergence of poststructuralist theories (in anthropology mainly represented by Claude Levi-Strauss), anthropology started to change in scope. Anthropologists began including other disciplines in their research, ranging from zoology, medicine, biology, cybernetics, pedagogy, history, sociology, psychology and so on. Psychological anthropology and medical anthropology became disciplines on their own and developed independently. In this light, Herdt and Stoller joined in on this interdisciplinary agenda and added something to this newly emerging interdisciplinarity. Their collaboration is coined by their creation of a new method, that of clinical ethnography. Indeed, the academic atmosphere seems to have been ripe for the introduction of their approach.

Clinical ethnography

Clinical ethnography, as Stoller and Herdt define it, is a combination of traditional ethnography and psychoanalytical research. It is the concentrated study of subjectivity in cultural context and, therefore, focuses on a micro-social understanding of sexual subjectivity and differences in cross-cultural communities. Clifford Geertz, in line with other critical anthropologists, questioned the possibility of understanding and describing the different modes of behavior and the related psychological states of awareness (conscious and unconscious) underlying the particular elements of communication and the intersubjectivity of shared communication (Geertz 1973). Stoller and Herdt, however, attempted with clinical ethnography to show that this is still "possible when clinical skill is combined with an in-depth cultural and linguistic understanding of a person and his personality" (Herdt and Stoller 1985: 116). Herdt and Stoller describe clinical ethnography as a "subtype and more precise form of participant-observation"; more specifically clinical ethnographies are the study of "the subjectivity of the researcher and the people who inform him or her" (Herdt and Stoller 1990: 29). To them, their "communications with real people, one to one or one to many; people creating and exchanging meanings within interpersonal relationships" is what matters (*ibid.*). The *clinical* is meant to represent their interest in processes of describing, interpreting and comparing the ways in which people express feeling, beliefs, and motives. According to Herdt, clinical ethnography, while connected to sexual culture, produces an outcome that tries to understand "the creation of sexual standards as absolutely central to the production of social and personal reality" (Herdt 1999: 110). Furthermore, Herdt describes the construct of sexual culture as meaning to indicate their emphasis on the erotic and states that clinical ethnography will "allow for greater diversity in sexuality across cultures, and hence to oppose sexual chauvinism in all its forms" (*ibid.*: 111). To some extent this may have been achieved; however, the practice of clinical ethnography, when adapted to the investigation of sexual culture, has fostered a strict notion of what the sexes, genders and sexuality are when viewed cross-culturally. In a footnote in *Intimate Communications* Herdt and Stoller note that "the connotation and treatment –of the clinic– is not intended in clinical ethnography" (Herdt and Stoller 1990: 29). However, their interviews and methods demonstrate otherwise as the following paragraphs show. Moreover, Herdt and Stoller did not seem to be particularly concerned with the ethical nature of their newly developed method of clinical ethnography.

Clinical ethnography, however, appears to be a strange kind of approach for an anthropologist to take, especially for one who has not yet been in touch with psychoanalysis; conversely, choosing clinical ethnography is a similarly strange choice for a psychoanalyst who does not have any knowledge on either ethnography or the geographic and cultural site in which he is producing a clinical/therapeutic setting. Ethnography is a method of gathering data about a specific culture and is guided by qualitative and

quantitative methods. In a footnote Stoller and Herdt refer to a dictionary that says the following about the clinical:

clinical ...involving or depending on direct observation of the living patient; observable by clinical inspection; based on observation, applying objective or standardized methods (as interviews and personality or intelligence tests) to the description, evaluation, and modification of human behavior. (quoted in Herdt and Stoller 1990: 29)

They add to this that “the connotation of diagnosis and treatment – of the clinic – is not intended in clinical ethnography” (ibid.). Clinical is commonly understood as pertaining to the examination and treatment of a patient. So the question remains what makes clinical ethnography “clinical” since all the above mentioned definitions of “clinical” reflect what ethnography already does if treatment is not intended. Herdt continues by saying that their “work is not therapy (though people felt better for having been able to talk in confidence)” (ibid.: 30). Therefore, the “clinical” in ethnography can not avoid implying that a pathological condition exists which is in need of treatment; this is quite astonishing when it concerns an entire population onto which this “clinical” ethnography is practiced.

Michel Foucault describes in *The Birth of the Clinic* (1973) how medicine became a disciplining discipline and how bio-medicine, the psy-sciences and related sciences were complicit in creating a control society increasingly characterized by bio-power. The creation of a specific kind of patient – the non-normal – took over and required a new handling; these non-normative people needed to be taken care of by specialists trained by institutionalized knowledge factories, such as the university. Midwives, healers, and charlatans were pushed to the margins; knowledge transferred between women for centuries was extinguished. The body/mind split generated a new kind of knowledge in which the only connection between the two was to be expressed solely through psychosomatic pain. The connectedness between body and mind was therefore pathologized whenever it featured. The patient in general became the one who should be lied to about his/her condition because only the specialist knows what the patient “has”. Particularly in “intersexuality treatment” mantras connected to secrecy and silence have been prominent since the 1950s (see chapter 1). Only recently physicians have realized that their “patients” are very keen to hear the “truth”, according to which they are treated.

Thus, the “clinical” in ethnography pays its tribute to the institutionalized, disciplining modes of medicine and the psy-sciences. In the light of colonialism and its successor and profiteer, namely cross-cultural anthropology, this method gains a new feature. A scientific discipline emerges that extends its disciplining powers upon non-Western societies, embodiments, cultures, subjectivities and bodies. So what we should be prepared to find in clinical ethnography is a gathering of data about an illness and simultaneously its cure. The informant in such an epistemological system is not just an interviewee but becomes a patient through this specific mode of interrogation.

4.2 Interviewing the Other

Only one of the collaborative works by Herdt and Stoller was explicitly on “intersexuality” and was called “Sakulambei - A hermaphrodite’s secret: An example of clinical ethnography” (Herdt and Stoller 1985). Stoller went to Papua New Guinea specifically to undertake this research and to assist Herdt in interviewing the person under consideration. The paper is a partial transcript of the interview. It is republished in the extensive volume *Intimate Communications* which is composed of an elaborate introduction to clinical ethnography and six interviews with other Sambian “interpreters” as Herdt and Stoller call their interviewees (Herdt and Stoller 1990).

Herdt has conducted ethnographic research about the Sambia in Papua New Guinea since 1977 and has published widely on the societal organization, rites of passage and gender relations among the Sambia (e.g. Herdt 1981, 2003). His work is renowned for introducing and coining the term ritualized homosexuality (Herdt 1984) (see chapter 5). The term Sambia has been used as a pseudonym for the people by Herdt to “protect” them. The question that arises here is: protected from whom? Or is it rather a protection of Herdt’s own work? Could it be that this pseudonym has been used so that no one else could go and interrogate and maybe contest Herdt’s findings so that cross-checks are made impossible? The paternalistic gesture inherent in giving pseudonyms could also be interpreted as the wish to produce hermetic, universal knowledge on a specific field, a specific people. To use the source of information in an anonymous way is to claim universality, especially when it comes to the production of knowledge on socio-cultural organizations of bodies and desires published for a Western audience. Universality is not by definition violent but under certain conditions it can exercise violence. Universality only emerges as a problem if it operates without being responsive of cultural particularity and if it is unsuccessful in reformulating itself in the moment of engagement with the specific conditions of its scope (Butler 2005: 6). In the accounts I am analyzing here I do see universalizing features which ignore differences in symbolic organizations and exert violence by refusing to take the social and cultural conditions into account.

Moreover, the universal applicability of their interpretation of their ethnographic data that Stoller and Herdt assume is expressed through their ignorance towards the semantic differences between their culture and those of the Sambia. In their use of language this becomes particularly clear.

Stoller neither speaks the language of the Sambia nor Pidgin, which makes him unable to communicate with the interviewee directly; instead, Stoller only speaks through Herdt who has to translate (mostly only partially and rephrased). Pidgin is the language, which Herdt uses to communicate with the informant. Stoller was introduced as an American “shaman” to the Sambia and the characterization is played out several times in the interview with Sakulambei. Since Sakulambei is a Sambian shaman, he is supposed to identify with Stoller on a psychoanalytical level or at least to perceive Stoller as a colleague with the same knowledge and experience of practice and, therefore, to be more open about his secret(s). Before the interview, Sakulambei is made to believe that Herdt’s and Stoller’s interest in him is based on his shamanic activities and knowledge; the real agenda, however, is to find out about his hermaphroditism.

- H: Yesterday Dr. Stoller talked to you about the kind of work he does. He said he was pleased to be with you and was very pleased with your decorations.
 Sa: [Quietly] Uh-huh.
 H: Yesterday he told you about his strength [jerungdu], which all three of us use in our own work. This morning, too, you saw him use it with Nilutwo [an adult informant, a man well known to us].
 Sa: Uh-huh.
 H: What did you think of that?
 Sa: No thoughts what ever he says. I can follow that. That’s all. [The resistance stiffens.]
 H: Hm.
 Sa: Yeah: Whatever he wants to talk about is all right.
 H: [To S.] He says he’ll do whatever you want.

(Herdt and Stoller: 1985: 128)

This is a layered statement. First of all, the supposedly total passivity of Sakulambei that Herdt constructs in the translation is striking. Sakulambei’s “whatever [Stoller] wants to talk about is all right” is made into a “he’ll do whatever you want” (ibid.). The listener (Stoller as well as the reader) is given the impression as if Sakulambei was in a fundamental state of submission under Stoller’s and Herdt’s gaze and questions. Herdt seems to try to impress Stoller by implying that Sakulambei will cooperate entirely and that Herdt has been successful in his fieldwork and making “friends” who subject to his demands. Furthermore, Herdt makes the effort to construct a “we Shamans” feeling between the three of them, seducing Sakulambei to identify with them so as to extract the secret from him that they are after.

The secret of sex

Herdt and Stoller continue to ask Sakulambei what he thinks about the hypnosis Stoller tried to practice on Nilutwo and which, according to Stoller’s own view, failed entirely. Sakulambei tells them that he thinks the performance was “really good” and Stoller concludes that “it was in a realm that he’s (Sakulambei) familiar with” (ibid.: 129). However, they do not venture further in this area because it is not really what interests them. Earlier, Herdt had tried to get information from Sakulambei about his hermaphroditism/“intersexuality” but “could not get him to discuss” though Herdt “wished very much to learn about [it] as another kind of ‘control’ case for understanding the origins and dynamics of Sambia gender identity” (ibid.: 126). Wishes such as Herdt’s are a common feature in research into “intersexuality”, since the abnormal is thought to serve as the defining feature of the normal. Herdt seeks to know the abnormal in order to understand the norm, a very common feature of modern science: its most prominent feature especially when it comes to sexology or other systems of knowledge that are based on pathologization. It can only be known what is “normal” if it is defined what is not. In this case Herdt and Stoller want Sakulambei to affirm their notion of the normal in the “other” here the Sambia people.

What Herdt and Stoller are trying to get from Sakulambei is not so easily obtained; therefore, they deploy some interesting rhetorical gymnastics to convince Sakulambei that he can trust them.

- S: What do you want to know that will be difficult for him to answer unless we help him respond safely?
 H: What is his sex life now?
 S: You might not get that so easily.
 H: [Exasperated] I haven’t *been* able to get it.
 S: He turned you away? Or you haven’t dared ask?
 H: I was just preparing to move into these sensitive areas when it stopped.
 S: I see. Could you – uh-
 H: - If somehow I could shift some of the responsibility to you. ...
 S: That’s what I was going to say –
 H: -but do it differently -

S: -but do it differently – try this one: Tell him that I put my power into you. Would that make sense? Not to the extent that you are me. But that I have put it into you. Not just taught it to you, but [S. makes a noise here like an electric drill – “bzzz”: The feeling is implanted in me.] put it into you so that he is safe when he talks to you about these things. [Emphasizes] “I will protect him because I put into you the capacity to protect him.”

(Herdt and Stoller 1985: 130)

This excerpt from the transcript is rather frustrating; one cannot really tell which impression Stoller was trying to give. We can only guess what Stoller had in mind when he “bzzzed” Herdt. It seems rather awkward and helpless but Stoller anyway uses this gesture to assure Sakulambei that the information he is going to give them will not be abused. I return to this later on when I discuss the outcome and the ethics of this method.

A translation from Pidgin to English by Herdt of the conversation between Stoller and Sakulambei was necessary since Stoller did not speak Sakulambei’s language. Herdt and Stoller have discussions in English in front of Sakulambei and Herdt decides what to translate for Sakulambei. Herdt himself speaks Pidgin, which is Sakulambei’s second language so Stoller and Herdt both face major interpretive obstacles in transmitting information. Alfred Gell reasons concerning this fact, in his review of *Intimate Communications*, that the “level of personal or cultural insight communicated in Herdt’s interviews is low indeed. And what any of this,” Gell wonders, “has to do with properly conducted psychotherapy beats me. A common language would appear to be prerequisite; but not, evidently for ‘clinical anthropology’” (Gell 1993: 839). Indeed it is especially striking that no translation or transparency is required; a direct transferability of Sakulambei’s psychic structures is assumed, which means here that psychic structures and their explanatory models are presumed to be cross-culturally valid and therefore essential. This alleged essential feature of psychic models are exercised on the basis of a cultural difference, which in its social implementation serves as the precondition for the exercise for clinical ethnography. This assumption reinforces the supposed universality of psychic structures and their pathologies because Herdt and Stoller assume transferability.

The informant/interviewee in the situation described has never agreed to subject him_herself to therapy nor does s_he even know anything beforehand about the situation that will be produced in the interview. In the relationship between interviewee and interviewer hierarchies are set in stone through the process of pathologization and medicalization. Gell observes this process in his review and states that “Herdt and Stoller torment their informant(s), and what is more, revel in their power to do so” (ibid.). Herdt, in the *Biographic Portrait* of Sakulambei in the introduction to the paper stated that “this paper reflects on his [Sakulambei’s] life, its public and secret stigmata, especially the private secret he dared not share with anyone, and the relationship with us that allowed him to share” (Herdt and Stoller 1985: 118).

There is an interesting feature to be found in this statement, as it assumes the mode of catholic confession as explained by Foucault in *The History of Sexuality* (Foucault 1978), the act of talking about an earlier experience that bothers you will relieve you from the associated pain. Foucault has convincingly shown that this practice is intrinsically connected to the acquirement of power by the one who listens over the one who confesses. This has an absurdity to it – a non-sequitur circle is established in this printed, published and widely distributed piece of a person’s secret. Herdt and Stoller seem to be completely ignorant to this fact as they exploit, misuse and ridicule Sakulambei’s trust towards them for the sake of their research. David Armstrong has shown that “confession, a technique of intimate surveillance, has been introduced under the guise of a progressive humanism” (Armstrong 1987: 71); the case of Herdt and Stoller is certainly an example for the continuation of such disguise. The intimate surveillance, which Herdt and Stoller conduct over Sakulambei constitutes his sex as a secret that has to be discovered by them. This puts the researchers in position of knowing, though this position of knowing is much more powerful than that of the interviewee: s_he is not informed about their aspirations. With their interview Herdt and Stoller seek to capture the essence of the confession: their clinical ethnography could be described as a “fine tuning of the surveillance machinery” (Armstrong 1987: 72). Moreover, the interview is transcribed in every detail and contains a number of sequences where Stoller and Herdt speculate how Sakulambei might be feeling. This is depicted in the following quote from the interview:

S: Does he want to cry? He may.

H: I thought he was about to, on the verge.

S: Does he...he... want my permission? Is it the wrong thing to do in this society?

H: It is the wrong thing.

S: It is all right with me.

(Herdt and Stoller 1985: 147)

The paternalistic, colonizing attitude that features here is a common gesture in Herdt’s and Stoller’s ethnographies (published in *Intimate Communications*) and results in a denial of a subject status for Sakulambei who is therefore represented as the non-civilized, the child, the non-developed and non-

knowing; yet, they want to know from him. Herdt even goes so far as to state that “Saku’s sense of self is so steeped in his shamanic role that his selfhood is merged with that role, and I believe he is unconscious of how much he defends himself and denies his past through this identity” (Herdt and Stoller 1990: 373). Why does Herdt feel that Sakulambei defends himself, and how can Herdt be so sure that he is unconscious about it? As we will see in the following analysis Sakulambei is anything but unconscious about defending himself against the intrusive questions he is being asked. The most interesting feature in this interview is, however, that Herdt and Stoller posit an a priori difference by exoticizing and “making the native speak” while they simultaneously create a silence: Sakulambei cannot be heard through Herdt’s and Stoller’s constant talk and interpretation.

Stoller guides Herdt through the process of questioning the interviewee by telling him to assure him that they are not going to harm him. The secret that is revealed could only be discovered through a lie, which Herdt decided himself to tell the informant/patient:

H: I’ve figured out a way to ask about his sex. But it would be better if you asked him. ... This may be premature, but we don’t have very much time. So, if you can somehow convey the message that shamans (*kwoolukus*) are... if somehow it can be conveyed that strong *kwoolukus* are also masculine shamans...and masculine men...who have erections, who screw women, who produce babies...

(Herdt and Stoller 1985: 134)

We learn a lot here about Herdt’s conceptualization of gender in Western culture or rather of masculinity. A masculine man to him has a penis and erections. This man uses this penis to engage in reproductive sex with women. In the biographical note about Sakulambei they stressed that “Saku has always been known as an enthusiastic and skilful fellator” (in initiation rites) and that he continued to be a fellator (after the normal period for initiates), which obviously makes his masculinity immediately suspect for Herdt (ibid.: 123). In general, Sakulambei’s maleness seems to be questionable, since Herdt and Stoller use “invert” language to describe homosexual masculinity. I will provide more background on the critique of ritualized homosexuality in chapter 5. Herdt mentions the concept of ritualized homosexuality only peripherally in relation with the person’s (here Sakulambei’s) sexual orientation and, moreover, with his gender and sexual identity. The assumed nexus between a person’s “sexual orientation”, the person’s body and the social behavior serves here as a central point of reference, which mirrors the Western categories that Herdt and Stoller use to conceptualize Sakulambei’s “identity” as a male hermaphrodite. They therefore draw on specific features of the category of masculinity with which they confirm their interpretation.

We also learn about Stoller’s self-conception in the following excerpt, wherein Stoller says the following in response to Herdt’s questions on Sakulambei’s sex life quoted above:

S: [spontaneously] Tell him: me.
H: Yeah.
S: Is that the approach?
H: I am thinking now that that’s how I can do it. [S. provides suggestions.] [to Sa.] Dr. Stoller wants to ask you more about your shamanism. He says, “The way of our shamans - he is talking about himself - is that a certain kind of shaman becomes a certain kind of man.” [Slowly] Now this kind of man develops just like everyone: First he’s a child, then he grows up. Then, he says of himself, “I found a way that I became a man. “And he wonders whether it was the same for you, or if it was different for you?
Sa: This shamanism here...
H: Yeah [softly almost a whisper].
Sa: Oh, this ... I don’t know. [Sa is engaged here.] Before did Yumalo do the same? I’m not sure.
H: [Enthusiastic] Oh, but he isn’t talking just about familiars, he’s talking about his body too.
Sa: This *kwooluku*?
H: No, no - of his very body. [Spontaneously to S.] I’m going to do something that’s not quite ethical, but I’m going to leave that language vague enough so that he may suspect that you are ... you may have some hermaphroditic qualities...[pause].
S: Good. [I do, in the sense that I can work with hermaphroditic patients in such a way that a few thought I was a hermaphrodite. That is why I said “good” and felt that it was not unethical.]

(Herdt and Stoller 1985: 134)

Herdt tells Sakulambei that Stoller is also a hermaphrodite and that, therefore, he can trust him. Stoller’s declaration of being a hermaphrodite claims a special status. Furthermore, this declaration claims a status of identity, which is supposed to make Sakulambei identify with him and, therefore, produce an other against whom he can form an imaginative community with Stoller based on exactly the fiction of sameness that Stoller is trying to evoke. Even though Stoller and Herdt reflect on their unethical behavior, for the sake of their research and the desired outcome of the interview, they continue with this practice and somehow even shift the responsibility to the informant’s “ability to project” this narrative onto himself:

- H: But I'm going to let him project it, if he can do it.
 S: Fine.
 H: [To Sa.] His appearance is real, but when he [S.] was born, they looked at this body and wondered: "This baby is another kind, or... They didn't know for sure. Now, when you see him, you see that he's become the same as a man. But now he's become a shaman. And now he's a man, too. He's the same as you...but when he was born, they thought he was a different kind. And so he wants to know if it was the same with you.
 Sa: This...I don't really understand you. [Pause. Silence.] My *kwooluku* ... when, before my mother gave birth. I don't understand well. [He understands precisely but is dodging. Still, compared to Saku's earlier sessions with H., he is not now frantic. Rather his voice is calm; he is not frightened. (comment by Herdt L.E.)]

(Herdt and Stoller 1985: 135)

Herdt thinks that Sakulambei does understand but is evading their presumptuous questions. However, as I read it, Sakulambei seems to have thought that they wanted to know more about how he became a shaman because he constantly refers to his occupation; this is understandable, since this is what the interview is supposed to be about. Larger parts of the interview in which Sakulambei talks about his shamanism have obviously been removed from the transcript, since for Herdt and Stoller these descriptions lead them "from the main course" of finding out about his hermaphroditism/"intersexuality". Again sex is given prominence as the secret of the western gaze; the projection on the other is a double projection of pathologization and medicalization interlinked with the normative Western gaze and uses of language. This Western gaze is in the case of clinical ethnography is also a clinical gaze as described by Foucault (1973).

The pathology of Sakulambei's sex is what Herdt and Stoller are after and what makes them blind towards other information that he might want to give. The information that they want to extract from Sakulambei concerns his "abnormal" and therefore interesting body. Difference observed by this Western, clinical gaze becomes immediately sex(ual) difference, and can only result from sexuality. The "different kind" that is evoked here by Herdt might not be related to sex at all, at least not the essential difference that Stoller and Herdt want to extract. Sakulambei's rhetoric strategies might be a sign of his realisation that they are getting at something other than what he wants to say. The secret of sex is invariably played out here as a projection by Herdt and Stoller. The Foucauldian "truth" of Sakulambei's body, which can reveal an explanation of everything, is at stake here. Even if Sakulambei had known what they were after it is quite obvious that he would not use the same terms to describe himself. The emphasis on difference Herdt hinted in this section reflects his desire to find the exception to the norm – his control case – for his other research conducted among the Sambia. Can we assume that Herdt's expectation of what he was to get out of Sakulambei guided the mode of interrogation? Indeed, Sakulambei hardly says anything other than conforming to Herdt's questions: sometimes it seems as if Sakulambei capitulates to their view, perhaps to get out of the awkward situation. What is it that Herdt and Stoller already "know"? And what is it they finally get? Sakulambei eventually tells them:

- Sa: They all looked at us at first – "I think it's a girl," that's what they thought. And then, later, they all looked at us and saw that we had a ball [testes], and they all said: I think it's a male."
 H: Oh-h
 Sa: They all say that. [Pause] And, likewise we've got cocks...and we've got balls.
 H: Um-hm.
 Sa: But our water [urine] we all lose it in the middle [extreme hypospadias: urinary meatus in female positions, not at the distal end of glans penis as in normal males] (sic). Now all the same, could they – would they fix it? [Voice almost cracks from strain, he sounds close to tears.] Or...⁹²

(Herdt and Stoller 1985: 140,1)

When Herdt (after talking at length to Stoller about the information he has elicited from Sakulambei) comes back to this question of whether "it" could be fixed, he adds that Sakulambei has to tell him more about himself. Herdt and Stoller were expecting Sakulambei to describe his body in detail at this stage of the interview. Even though Sakulambei does not provide such a description, Herdt and Stoller form a medical diagnosis (of extreme hypospadias) according to their presuppositions about Sakulambei's appearance. A set of norms and abnormalities of bodies, here "normal" male bodies, is reestablished by this "diagnosis".

The mechanisms at work in the production of knowledge on "other" cultures have been conceptualized as Eurocentrism, Orientalism or Occidentalism (e.g. Said 1978; Young 1990; Venn 1999). These notions designate the creation of two distinct epistemological spaces: the "West and the Rest" (Hall 1996). This division of space is no longer and has never truly been a geographical one. Specific effects of hegemonic representations of the Western self and culture produce the other as distinct in a specific way.

⁹² Even though it is quite striking that Sakulambei starts to speak about himself in the plural there is no explanation or further elaboration on the issue in the text. I will elaborate on this further down.

The history and presence of (neo)colonial moves need not be geographical, yet, they are always political. Therefore, the processes of institutionalization and legitimization of anthropological knowledge can be seen in the light of Foucault's power/knowledge complex. Everything is measured against the parameter of a constant self-affirmation of the "West". Elspeth Probyn argued that the question here is that "of the position of the knower in relation to the stories that he tells" (Probyn 1993: 61). I concur with Probyn in extending this question about the position of the knower in relation to the other that s_he constructs. I consequently argue in line with Probyn that the other "is but an effect of the ontological construction of the ethnographer's self; the other is still a fiction of the ethnographer's own making" (ibid.: 66). Concerning the interview with Sakulambei, it is more than evident, that Stoller and Herdt project the phantasm of hermaphroditism/"intersexuality" upon Sakulambei. In their powerful position of describing Sakulambei's body (yet silencing his position) their power of definition is a self-affirmation in regards to their expectations of what Sakulambei will reveal to them. This interview testifies more to the position of the "knowers" in relation to the story of sex they tell than to what has actually been told.

The Western gaze

Toward the end of the interview, we learn something else. A German businessman arrived at the village, about twenty years earlier, when Sakulambei was only a child. This man, Gronemann, came with a government control agency passing through the Sambia valley in the 1960s, undressed the 10 year old Sakulambei and took pictures of him.

Sa: [...] And so – like this: He took our picture for no reason, and he didn't pay us for it. ...He didn't give us good pay or anything like clothes.

(Herdt and Stoller 1985: 144)

Stoller then realizes that he and Herdt have been behaving in much the same manner as Gronemann had, and so he assures Sakulambei and the reader, that:

S: [...] I will *not* take a photograph; I will not ever humiliate him; I will not ever let anybody know about him – I might let them know about *somebody*. [And that, reader, is, in reality, all you have been told.] That is, this story that we now have, as a piece of our methodology, might be described. There's no way we can tell him that it won't make a difference. But I promise *him* that I will not – the most important thing – ever humiliate him.

(Herdt and Stoller 1985: 145)

I leave this quote to the judgment of the reader, yet I return to the aforementioned moment of diagnosis, which was based on the assumption of the *appearance* of Sakulambei's body. Yet, is there really a difference in one or the other? Is there a difference between being translated into another language and of a visual image that is being obtained? This process has also taken place unwillingly, not-knowingly, and Sakulambei again remained unpaid.

The method, which is applied in Stoller's and Herdt's work to give a (psychological) image of the interviewee/informant/patient, is related to the methods frequently used in medical textbooks which discuss "intersexuality" (e.g. Money 1968). Such texts display photographs of people whose bodies are fully displayed; the eyes are blacked out with a bar. This technique is used to conceal the identity of the person. However, the process of taking the picture as well as the experience of being gazed at, examined and diagnosed is determined to induce feelings of shame and humiliation (Dreger 1999; Creighton et al. 2002).⁹³ Sakulambei's experience with Gronemann has clearly evoked similar emotions. What would he say about the image of him that was again taken, exhibited and distributed though conveyed through words and only obscured by a pseudonym?

In line with Mike Ball and Greg Smith, I argue that "technologies of realism" can be identified, which are intrinsic to the uses of photography and film in ethnography (Ball and Smith 2001); furthermore, as I show in chapter 5 that they are also at work in psychological and bio-medical research. As much as positivism and photography go hand in hand, bio-medical and psychological data tend to be similarly positivistic. Moreover, these two methods are both likely to produce objectifying processes. According to Ann McClintock "photography was both a technology of representation and a technology of power" (McClintock 1995: 124). With photography, she concludes, "Western knowledge and Western

⁹³ Creighton et al note that this "remains standards medical practice today with most textbooks and even the most prestigious journals" (Creighton et al. 2002: 67). They furthermore stress that "medical photography may have significant effects on the patient and their family" (Creighton et al. 2002: 71) and then conclude that "whole-body naked photographs of children or adults with intersex disorders cause serious psychological sequelae and should not be taken. They do not educate or inform and should no longer be used for teaching and publication" (Creighton et al. 2002: 71).

authority became synonymous with the real” (ibid.: 123); their descriptive potential is assumed to be objective and neutral. McClintock furthermore, cautions us that:

it should not be forgotten that photography emerged as a technology of surveillance within the context of a developing global economy. A circulation of notions can be observed between photography and imperialism.(...) Photography provided the cultural equivalent of a universal currency. (...) Hailed as superseding the messy enigmas of language and as capable of communication on a global scale through the universal faculty of vision, photography shifted the authority of universal knowledge from print language to spectacle. (McClintock 1995: 123)

The realistic impetus of both clinical data and pictorial methods produces notions of objectivity and truth of ethnographic data and ”thus capitalizes upon [its] immense descriptive potential” (Ball and Smith 2001: 304). Ball and Smith furthermore describe the realism of documentary, along which I also count the clinical data, as a “professional ideology” (ibid.). As much as photography or film has been used in anthropology to establish certain assumptions, clinical data serve the manifestation of specific fantasies. Ball and Smith state about the uses of photography in anthropology:

In the late nineteenth century, influenced by pre-Darwinian evolutionist theories, physical anthropology and anthropometry made extensive use of photography to reveal the putative difference between the Mongol, Negro and Caucasian ‘racial’ groups. Guided by Huxley and Lamprey’ attempts to systematize and record the physiological measurement of body mass and skeletal size in a manner that would enable reliable comparative morphometric data to be collected, anthropometric photography became established. (Ball and Smith 2001: 306)

The “myth of photographic truth” (Sekula 1975), which emerges by treating photography as unmediated and mechanical transcriptions of the supposedly transparent facts is also apparent in the clinical data presented by Herdt and Stoller. The photograph always implies to speak a universal language, which cannot be disputed; it also emphasizes the affinity between physiognomy and this supposedly universal language (Fyfe and Law 1988). These data derive their power and autonomy from the above-mentioned discourses of bio-power and posit an assumed physical difference at the core of ethnographic fieldwork.⁹⁴ Herdt and Stoller of course can and do use Groneman’s pictures or rather the invocation of the picture. Even though they do not reprint them, they do install them as a powerful reference by referring to them as the proof for their discovery. The power of the picture which was taken thirty years ago is reinstalled solely by the reference and the reliance that Gronemann’s gaze can be trusted, i.e. is real(istic). The connection between photographic pictures and medical clinical data and diagnosis is that both methods (or concepts) appear to provide the most objective and truthful account of the real. The power of the picture is not being questioned, medical diagnosis is added, then stirred, and we are seduced to believe. Foucault has described the workings of the gaze in relation to hearing:

A hearing gaze and a seeing gaze: clinical experience represents a moment of balance between speech and spectacle. A precarious balance, for it rests on a formidable postulate: that all that is *visible* is *expressible*, and that it is *wholly visible* because it is *wholly expressible*. (Foucault 1973: 115)

Therefore, the interpretation by Herdt and Stoller of the “speaking” Sakulambei does can be interpreted through this Foucauldian analysis. The verbal descriptions, which come with the medical diagnosis interlink with the visual “spectacle” and form the basis for the diagnosis to be made. Positivism is based on the seeing eye and becomes a highly powerful aspect in this configuration (Harding and Hintikka 1983). The seeing eye is the tool for the observation to be done by the traveller/intruder/anthropologist and the observation serves as the foundation of distinctions and those serve the process of classification. Visible nature is to be distinguished and classified according to the gaze that the travellers/intruders/anthropologists bring with them. According to Foucault this is the ordering of the science which happens through “the exercise and decision” of this gaze (Foucault 1973: 89). Foucault has described this gaze as “the gaze that sees” and which inevitably “is a gaze that dominates” (ibid.: 39). The “gaze” that Foucault describes is not the poetic and benevolent gaze of longing. Rather, he describes the gaze of psycho-medical discourse; a purposeful looking that creates meanings and their boundaries more than it just sees them. Morgan Holmes describes this in relation to intersexualization, to her it is “the medical gaze that *creates* as much as, or more than, it *describes* pathology” (Holmes 2008: 114). The psycho-medical and anthropological narratives I analyzed are, as Traub describes it, “both dedicated to rendering intelligible and distinct that which appears chaotic, primitive, or previously unknown, through strategies of

⁹⁴ In cross-cultural anthropology the use of the photography also represents another dimension, which I will not discuss here, due to space. In regards to racialization and the use of photography in anthropology, Deborah Poole states that “photographs were rendered as ‘data’ and through this “the concept of race emerged as an abstraction produced by the archive as a technological form” (Poole 2005).

description, nomination, and classification” (Traub 1999: 305). I argue that the psycho-medical account described here penetrates the body not just metaphorically, but cross it, go through it in its interrogational mode, gaze and intrusive technologies of medical examination and psychoanalytical interrogation.

Foucault has also shown how natural history involves the observable structure of the visible world and does not concern itself with functions and relationships invisible to the senses (see Urry 1990). The medical gaze is as socially organized and systematized as the gaze of the anthropologist – it is equally supported and justified by an institution. The first scholars of classification such as Linnaeus and the first scientific expedition in the beginning of the 18th century figure in the modern arrangement of cross-cultural intersexualization.⁹⁵ Foucault stated that “before the end of the eighteenth century, *man* did not exist” (Foucault 1994: 308). With this emergence of *man* the discipline of anthropology came into being. There was “no epistemological consciousness of man as such” before that, and Foucault believed that was changed by an act of representation that relies upon a complex system of interconnections of different meanings. For Foucault it was the “act of speaking” and the “act of naming”, which produces what “human nature” is. Representation is folded back upon itself when it comes to the linking of “the chain of being” to “human nature”. This “chain of being” is fragmented, discontinuous and doubled. Foucault deciphers “human nature” as the result of powerfully unifying certain characteristics into representation of itself. In his works, Foucault demonstrated how “human nature” is “spoken” by the category of sexuality- but he neglected to look at the relationship between sexuality and categories of race and difference in culture that are always implied in this “speaking”. The body and psyche, which are looked at here, are at the same moment constructed as pathological and therefore as being other, precisely because of their supposed pathologies and as being pathological because of their otherness. While the explanatory construction of the others’ bodies remains in specific epistemological frameworks, these frameworks exercise a specific power through their style. Traub argues that “locating the body (and bodies) within prevailing epistemic hierarchies by charting corporeal cartographies, anatomies and travel narratives not only function as colonialist discourses but urge colonialism into being” (Traub 1999: 305). I deem these cross-cultural and cross-disciplinary aspects of particular interest for my project. External features are taken to be the indicator for the person’s inner self, her_his identity and therefore her_his position in the orders of nature and society. The early development of anthropology in the cradle of colonialism influenced the way in which this discipline conceived and produced “the other” as historically fixed, stable and unchanging; a suitable means to the gaze of the anthropologist. The anthropological subject, the person who objectifies the subjectivities of others, is a particular cultural construction of Western thought. This subject has not been sufficiently deconstructed, even though the epistemological break caused by postmodern influences in the discipline of anthropology attempted this. Western anthropologists’ subjectivity, reflected in her_his “gaze”, is visible in the lasting conception of the “native” as been fixed in his/her specific place and time; as such, this concept of the “native” is perceived as representative of a “people”, which is othered through viewing it as distinct and holistic. Furthermore, this “gaze” is reflected in the anthropologists’ location in the field and to the ones s/he studies, as well as in the way in which s/he translates the findings from the field (including personal experiences) into the discourses of anthropology. Clinical ethnography into “intersexuality” and other non-normative forms of human existence is subjected to Western modes of bio-power (Foucault 1978), which delineates the application of bio-medical knowledge and technologies to the regulation and the disciplining of bodies and individuals. In Foucault’s notion, sexuality [and I add: sex/gender and, therefore, in the interconnection of the two also “intersexuality”] is laden with relations of power and represents a particular dense transfer point for these relations. Sex-gender-sexuality- systems are major means by which so-called experts exercise control over so-called patients. Sexuality, according to Lyons and Lyons, as a concept is installed and imposed in order to secure a “regime of bodily control, categorizing and disciplining behavior and identity” (Lyons and Lyons 2004: 12, 13). Lyons and Lyons further suggest that in “Foucault’s formulation the watchers do not create sexual behaviors or insane ideation [and again I add the creation of “intersexuality”]. They label them, diagnose them, and give social reality” (Lyons and Lyons 2004: 13). I suggest that in terms of sexual identity and rationalization of illness, the watchers or researchers are complicit in a creation process, not least regarding terminology.

The assumed completeness of the expressible, however, in the 20th century needs more exploration by the Western epistemic gaze. This gaze extends itself upon the smallest biological entities according to the waxing power of bio-medicine. I explore this extension of the bio-medical gaze in the following chapter. As I have shown in the introduction, Sarah Baartman and Caster Semenya were both

⁹⁵ The will to categorize nature is a dominant feature in Western knowledge production. This academic “spirit” can be traced back to Carolus Linnaeus (1707-1778) who was the first to invent categorize “species”. Foucault described this process of categorization as relying on the transferability of the seen (the gaze) into language. In referring to Linnaeus he writes “by limiting and filtering the visible, structure enables it to be transcribed into language. It permits the visibility of the animal or plant to pass over in its entirety into the discourse that receives it” (Foucault 1994: 135). The desire to capture nature is mirrored in the descriptions of outer features of people in order to assign deeper meaning to their “identities” and subsequently to be able to place them hierarchically in the orders of “nature”.

equally represented as “spectacles”. The printed and published pictures were conceived of as the proof for the truth of their sexualized difference, which was mediated through their racialized difference. Especially in the case of Semenya, through the extensive distribution of pictures of her body on the internet, everybody suddenly was authorized to describe, categorize and diagnose her sex/gender.

Conclusion

The case study presented in this chapter is an analysis of the newly invented method of clinical ethnography by Gilbert Herdt and Robert Stoller. I identified a number of thematic streams in this specific practice of anthropological research particularly the inclusion of the methods of psychoanalysis to ethnography. I have explored the institutional backgrounds of Herdt and Stoller and the foundations of their collaborative work, which is based on their common interest in sex-gender-sexuality-systems. Especially Stoller’s interest is based upon the intersexualizing research he has done “back home” in California (see chapter 2). With their newly created method of clinical ethnography, Herdt and Stoller collapse and conflate the position of the interviewee/informant with that of the interviewee/patient/analysand. This doubtful method is only enforced by the initial lie they tell Sakulambei about Stoller’s non-existent “intersex condition” to make him talk. An interrogation of these specific proceedings of the two researchers shows that the interview with Sakulambei was conducted with certain assumptions in mind, such as his inhibition about talking about his hermaphroditism/“intersexuality”. The unethical methods of interviewing are accompanied by the “technologies of realism” of clinical data and the denial of Sakulambei’s subject status, which is repeatedly obviated by Herdt and Stoller. I argue that Sakulambei’s body has been colonized by Western modes of research and Western assumptions about his bodily features and subsequent psychological condition, which results in cross-cultural intersexualization. In this interview Sakulambei is forced by the researchers to identify with the diagnosis that the clinical gaze of the two researchers produces; the secret of his embodiment is being boxed in with the category of an identity. Sakulambei is silenced the very minute he is translated to English and is subjected to the Western processes of (inter)sexualization through this silencing and the accompanying modes of pathologization. The case of Caster Semenya, described in the introduction, shows that in contemporary intersexualization (or the diagnosing of DSD) silencing and pathologization still colonize bodies and identities on the grounds of the secret of sex which they are forced to confess. As I argue throughout this dissertation, it is the experts in their modes of research, their desire to diagnose and the concepts they use that are the phenomenon rather than the bodies and identities which are pathologized.

This case study of the collaboration between the anthropologist Gilbert Herdt and the psychoanalyst Robert Stoller shows how the interviewee has been forced to talk about and identify with a specific body, a specific sex/gender and a specific sexuality which Herdt and Stoller have a priori set as abnormal. The Western gaze upon the other is psycho-medical gaze that does not just describe but create the other. The universalization of the few “data” Sakulambei provided Herdt and Stoller with would follow only a few years later, which I explore in the following chapters. The information Herdt and Stoller gathered in this interview was later re-used in a paper combining bio-medical and ethnographic research. Whereas a psychoanalyst and his method have featured in the work described in chapter 4, in the following it will be physicians and their methods.

5. Colonizing the Other

Introduction

In this chapter I first interrogate the research the New Yorker physician Julianne Imperato-McGinley has conducted with Robert Stoller in the Dominican Republic in 1979. Imperato-McGinley’s research was designed to prove the influence of a prenatal biological force, which Stoller has already worked with as a hypothesis in the previous years (chapter 2). I show how Imperato-McGinley and her research team construct their “natural” research laboratory in three villages of the Dominican Republic in order to prove the influence of testosterone on a male gender identity. In order to put this research in its disciplinary context I give insight into the history of endocrinology and show how testosterone has been constructed as a male hormone. Since Imperato-McGinley et al. work on this hormone and male pseudo-hermaphroditism, their research tends towards the affirmation of masculinity in their research sample. I argue that in their account on cross-cultural intersexualization an underlying heteronormative impetus

constructs femininity as pathology. I will show how in the course of their research they construct the other in the other culture through Western bio-medicine and the imposition of pathologizing notions of the hermaphrodite. I then move to a study conducted by Gilbert Herdt and the endocrinologist Julian Davidson in Papua New Guinea. Herdt invited Davidson to collect blood and urine samples from the people whom Herdt has identified as being *kwolu-aatmwol*, a supposed third gender or third sex. Herdt and Davidson refer to Imperato-McGinley's studies and attempt to defeat their outcome by providing data on male pseudo-hermaphroditism in Papua New Guinea. I show how they equally construct their sample as more natural and less restrictive and therefore as less civilized and sophisticated. Additionally, I decipher a colonization of the symbolic system of the culture that is interrogated as well as the uses of their information to first exoticize and then to universalize the lived experience and personal embodiment of the other. This also becomes clear when Herdt and Davidson assume that psycho-social data confirm and support their bio-medical data and vice versa. Moreover, as I will show, Davidson and Herdt use their own representations of gender to construct the notion of an ambiguous gender – a hermaphroditic gender identity. Yet, as I argue, the representation of this particular gender identity, which they claim to have found is equally aimed towards maleness, since Herdt and Davidson's hypothesis of biological "male pseudo-hermaphroditism" needs to be consolidated. I will then analyze two more accounts by Herdt from 1990 and 1994 in which he sums up the research he has done with Davidson and Stoller (chapter 4). Here he concludes that the Sambia in Papua New Guinea epitomize a three-sex system. By postulating a third gender on the basis of bio-medical data, I argue, Herdt colonizes the symbolic system of the Sambia. Western bio-medical knowledge is hereby constructed as universal. When I discuss Herdt's concept of ritualized homosexuality (Herdt 1984) I concentrate on his use of the Western concepts of identity and sexuality and the colonial move to superimpose the Western notions of identity upon non-Western societies. Moreover, this analysis will be used to show which theoretical function the construction of a third sex and a third gender take on in the merging of psychological and bio-medical concepts in relation to cross-cultural intersexualization. I exemplify with my analysis of Herdt's work, how Western models of bio-medicine and psychology play a specific role in the (historical) context of colonization from which anthropology and ethnography cannot be separated.

David Arnold in his book *Colonizing the Body* states that "medicine was only one – albeit a particular critical – example of a whole colonizing process" (Arnold 1993: 8).⁹⁶ In my analysis of cross-cultural intersexualization I add another dimension namely the process of exploitation of biomedical data, which only serves the knowledge production of the West and not the people who are investigated. As I will show in the case of Imperato-McGinley, Stoller, Davidson and Herdt, bio-medical research was not undertaken to improve health conditions but solely to enhance bio-medical knowledge production, which would not benefit the examined subjects of the study. In my analysis of the letters, which the Sambia people wrote to an American anthropological journal about their feeling of being exploited by Herdt I furthermore decipher the colonial attitude which is present in this specific medical anthropological knowledge production.

5.1 Colonizing the Body of the Other

In 1979 Stoller continued his investigation into the biological force (see chapter 2) with the help of a medical team. This research was conducted in the Dominican Republic together with Julianne Imperato-McGinley MD, a physician at the New York Hospital-Cornell Medical Center in New York, specializing in internal medicine. The research for the article, "Androgens and the Evolution of Male-Gender Identity among Male Pseudohermaphrodites with 5-alpha Reductase Deficiency", was supported by a clinical investigator-award from the National Institute of Arthritis, Metabolism, and Digestive Disease, as well as by a Clinical Research Centre grant, a research grant from the National Institutes of Health, a National Foundation-March of Dimes research grant and a grant from the Shorr Fellowship Fund and a Grant from Gulf and Western (Dominican Republic). Evidently, quite a few institutions were interested in the research, which was about to be conducted.⁹⁷ The article was drawn from a sample of psychosexual data that Imperato-McGinley et al. interpreted as suggesting that exposure of the brain to androgens (*in utero*, during the neonatal period, and at puberty) has an "impact in determination of a male gender identity and, under certain circumstances", "can override the female sex of rearing" (Imperato-McGinley et al. 1979b: 394).

⁹⁶ Arnold speaks here of the treatment of epidemic diseases such as cholera, smallpox and the plague in colonial India. His account focuses on the practices that have been applied during these epidemics. He also stresses the point of the unequal yet mutual relationship between local medicines and Western medicine and analyses the colonizing habits of Western medicine in its historical, political and cultural dimensions. He stresses the institutional and technological dominance by the British colonizers over the colonized because in India, Western medicine was applied it also served to manage the colonies. However, the medical knowledge was sometimes refashioned in response to local needs.

⁹⁷ This article became a standard study and is quoted in psychology and sociology textbooks such as Gross R. D. (1987): *Psychology: The Science of Mind and Behaviour*, London: Hodder and Stoughton

The report states with direct reference to Stoller that “the data suggest that some hormonal factors or biological force as previously postulated by Stoller, was strong enough in this subject to override the female sex of rearing” (ibid.: 393). The account thus continues Stoller’s hypothesis of a biological force into the bio-medical realm and construes gender identity as innate and stable throughout life (the person always knew “what” they actually are). The concept of a bio-medical foundation to a person’s identity, here gender identity is used to make an argument for the impact of testosterone. Imperato-McGinley followed up the issue and in the same year conducted a study in three villages in the Dominican Republic. The studies represent an argument against sex of rearing in favor of prenatal and post-pubertal hormones and were designed to “determine the contribution of androgens to the formation of male-gender identity” (Imperato-McGinley et al. 1979a: 1233). People under surveillance were diagnosed as having “decreased dihydrotestosterone production due to 5- α -reductase deficiency”; they were depicted as “unique models for evaluating the effect of testosterone, as compared with a female upbringing, in determining gender identity” (ibid.).⁹⁸ The hypothesis of the article is that “exposure of the brain to normal levels of testosterone in utero, neonatally and at puberty appears to contribute substantially to the formation of male-gender identity” (ibid.). Imperato-McGinley et al. conclude that the surveyed subjects demonstrate that “in the absence of sociocultural factors that could interrupt the natural sequence of events, the effect of testosterone predominates, over-riding the effect of rearing as girls” (ibid.). The researchers emphasize that their data “show that environmental or sociocultural factors are not solely responsible for the formation of gender identity, androgens make a ‘strong and definite contribution’” (ibid.: 1236).

“Male anything” and endocrinology

The history of endocrinology shows some interesting features in this regard. The origin of endocrinology as a discipline appears in the 1920s. Richard Goldschmidt, an endocrinologist, actually coined the term “intersexuality” (see introduction). Research into “intersexuality” therefore led to a discussion of the history of hormone research and of the social and political reasons that helped designate testosterone and androgen as male and estrogen as female. Nelly Oudshoorn is famous for her critical feminist investigation in endocrinology, which documented how hormones were categorized as “sexually” specific. As Oudshoorn and Anne Fausto-Sterling have shown, the designation of hormones as either male or female was fundamental to the construction of the presupposed essential differences in male and female bodies as fact (Oudshoorn 1994, 2001; Fausto-Sterling 2000). Morgan Holmes sums up Oudshoorn’s project as illuminating “the selective process through which scientists decide which truths they will discover” (Holmes 2008: 41). Hormones were welcome substances with which scientists manifested the social organization of two genders via a dichotomously organized essence found in bodies. In the collaboration between Stoller and Imperato-McGinley the interconnection between Stoller’s psychological categories of masculinity and the category of androgen/testosterone as a male/masculine hormone interconnect. Androgen/testosterone becomes the sole signifier of a specific behavior, which shows its effects at the onset of puberty – with maturation.

The fascination with the active production of male “anything” (or “substance”) as an overwhelming force can be observed in this history. John Money’s assertion that CAH⁹⁹ females show increased intelligence and a propensity toward lesbianism as a consequence of virilization is proof of this patriarchal implication in intersexualization (Money 1968: 40). Money reports that “it is possible that the genetic factor responsible for CAH is linked to another genetic factor responsible for intellectual superiority” (Money 1968: 40). Virilization as a biological process based on hormones and genetic dispositions is thought to be responsible for intellectual achievement – a rather commonsense assertion that reveals deeply sexist reasoning. Morgan Holmes has shown that the diagnosis of CAH and AIS as “intersex conditions” require a conception of hormones as sex(ualiz)ed/gendered.¹⁰⁰ Moreover, specific “appropriate functions” have to be assigned in order to become regarded as diagnostic labels. Holmes states that

this is because the supposed masculinization seen in some females with CAH is attributed to an excess of “male” hormones in the female’s body. Likewise, AIS is described as the “failure” of the chromosomally male

⁹⁸ 5-alpha-reductase type 2 deficiency is an autosomal recessive condition that prevents testosterone to convert to the dihydrotestosterone (DHT) which produces masculinization of the external genitalia in utero. Genitals are said to be either “normally” male, “normally” female, some anatomies are described as “hypospadias” or “mild clitoromegaly”. There is no uterus of fallopian tubes but testes. (e.g. Wilson 2006).

⁹⁹ Congenital adrenal hyperplasia (CAH) refers to excessive or deficient production of sex steroids. It can alter the development of so-called primary or secondary sex characteristics. The definition as an intersex condition varies according to which symptoms are included in the definition of intersex.

¹⁰⁰ Androgen insensitivity syndrome (AIS) is commonly described as a “genetically inherited change in the cell surface receptor for testosterone”. Congenital Adrenal Hyperplasia (CAH) is described as an “inherited malfunction of one or more of six enzymes involved in making steroid hormones” (Fausto-Sterling 2000: 52).

(XY) body to respond to “male” hormones, and hence “fail” to develop the secondary sex features of a male. (Holmes 2008: 48)¹⁰¹

Holmes stresses the asymmetry between the concept of maleness and masculinity and femaleness and femininity, which is found in the conceptualization of androgens/testosterone as male. Her conscious use of the vocabulary of “failure” in regards to the body’s ability to become male in some cases indicates the inherent patriarchal and sexist conceptualization of sex(ual) difference. Sex(ual) difference neither in the psychological framework of Stoller nor in the endocrinological framework of Imperato-McGinley is thought of in terms of symmetry; Stoller finds his theory of profemininity and the effort boys have to go through to become properly masculine as an achievement backed up by Imperato-McGinley’s theory of male hormones overpowering the female sex of rearing and vice versa. Masculinity is the natural force on the biological and the psychological level, which has to be achieved, and which can literally overpower femininity. Biological argumentation is used to reaffirm the status quo and the superiority of males (not just in the Dominican Republic but as a universal biological fact).

The “syndrome”, according to Imperato-McGinley et al., results in “severe ambiguity of the external genitalia of the affected male fetus,” which in her view troubles “the adequacy of sexual intercourse” as it “depends on the size of the phallus and the severity of the chordee”¹⁰² (Imperato-McGinley et al., 1979a: 1234). In the study, one person is described as having “changed to a male-gender identity” but continues to “dress as a woman” (used to justify the category of “female-gender role”). Furthermore, it seems necessary for Imperato-McGinley et al. to mention that the person “has the affect and mannerisms of a man and engages in sexual activity with village women” (ibid.). Another person has completely broken the rules because she has “maintained a female-gender identity and female-gender role” (ibid.). She was “married” (notice the inverted commas in original) to a man but was punished for her disregard of her natural designation, because he “left her after one year” (ibid.). The depiction of this person is highly negatively connoted; the description reads as follows:

She left the village, has been living alone and working as a domestic and has not been sexually involved with other men. She wears false breasts, yet her build and mannerisms are masculine. She denies any attraction to women and desires surgical correction of the genitalia so that she can be a normal woman. (Imperato-McGinley 1979a: 1234)

The heterosexual matrix underlying these observations is also cultivated by stereotypical depictions of what is a real or normal woman. The imputation that she “denies” to be attracted to women implicitly implies that she is or has to be according to her supposed biological masculinity. Male and female but also a specific heterosexual masculinity and femininity are universally applied. This reveals how heteronormative assumptions (with their focus on penetrative, vaginal intercourse), as well as assumptions about stereotypical Western social behavior, shaped the study. The representation that is conveyed here testifies to the pathologizing habits in the uses of language of experts in intersexualization.

An “experiment of nature”

Imperato-McGinley et al. draw the conclusion that in what they call a “laissez-faire environment”, the sex of rearing when contrary to the testosterone-mediated biological sex, the “biologic sex prevails if the normal testosterone-induced activation of puberty is permitted to occur [even though] the issue of nature (i.e. androgen) versus nurture (i.e. sex of rearing) in the determination of male-gender identity cannot be adequately resolved in these cases” (Imperato-McGinley et al. 1979a: 1235). It remains unclear what a laissez-faire environment means; yet it implies that it is less culturally sanctioned or sophisticated. The core of the article, namely that the “case” can not fully be resolved, is contradicted by the following:

Thus it appears that the extent of androgen (i.e. testosterone) exposure of the brain in utero, during the early postnatal period and at puberty has more effect in determining male-gender identity than does sex of rearing. This experiment of nature [sic] emphasizes the importance of androgens, which act as inducers (in utero and neonatally) as activators (at puberty), in the evolution of a male-gender identity. This study also shows that gender identity is not unalterably fixed in early childhood but is continually evolving, becoming fixed with the events of puberty. (Imperato-McGinley et al. 1979a: 1236)

¹⁰¹ Morgen Holmes furthermore adds to this that “many persons with an XXY karyotype (Klinefelter’s syndrome) or with CAH or androgen insensitivity syndrome (AIS) could not have been diagnosed as intersexed prior to the late 1950s” (Holmes 2008: 48).

¹⁰² The medical term chordee denotes the curved appearance of the penis. The penis is either curved upwards or downward at the junction of the head and shaft. Sometimes chordee is associated with hypospadias. It is considered to be a “congenital malformation”; the cause is unknown.

In a later article in 1981, Imperato-McGinley and her research team state that “the development of gender identity in man is continually evolving throughout childhood becoming fixed with puberty” while overriding the female sex of rearing (Imperato-McGinley et al. 1981: 106). Androgens are connoted as the masculine essence, which can “evolve” from a supposed non-evolved stage of femininity – the body leading the “boy” into superior manhood that has always already been hidden in the form of hormones in the person’s body. Moreover, the term “experiment of nature” implies here that this is nature but it is not normal for nature and therefore pathological. Hermaphroditism/“intersexuality” has frequently been called an “experiment of nature” but in the context of a neo-colonial setting, which we find in the case of medical research by Westerners in a non-Western country, it achieves a new meaning in connection with the assumption that the culture of the other is a “laissez-faire environment”. The supposed “experiment of nature” is regarded as even more natural since it has allegedly not been influenced by culture: it has not been interrupted in its development, no cultural intervention has taken place and thus it doubly serves in this logic as a test-case for the normal and natural. This is a common feature in bio-medical research in non-Western cultures conducted by Western researchers.

Additionally, I argue that the failure of Western researchers to recognize that their pathologizing attitudes change the perceptual commitments/perception of people under surveillance is a significant feature of a colonizing expansion. The semiotics of the West are superimposed onto the “other”. Imperato-McGinley et al. report that “now that the villagers are familiar with the condition, the affected children and adults are sometimes objects of ridicule and are referred to as *guevedoche*, *guevotte* (penis (or eggs) at 12 years of age) or *machibembra* (first woman, then man)” (Imperato-McGinley et al. 1979a: 1235). There is no indication that people were in earlier times distressed by the “phenomenon” or perceived of it as such. Only after the researchers invaded the village did people think in terms of otherness about members of their community. Through their investigations, Western researchers created a social category of sexual deviation that had not previously existed in the community. Those who do not follow the “call of nature” that is the biological force are pathologized. Only after framing a so-called natural experiment as a “phenomenon”, specific expectations and determinations can be put in place and those who do not obey their assigned appropriate designation are pathologized. Local understandings of materiality were overwritten and extinguished. The promotion of “intersexuality” as an identity position, guarded and framed by the processes of intersexualization, has taken over the field of socio-cultural-symbolical orderings of this particular society. The same phenomenon is to be found in the study that has been done in Papua New Guinea only 4 years later.

The paper “The Sambia ‘Turnim-Man’: Sociocultural and Clinical Aspects of Gender Formation in Male Pseudohermaphrodites with 5-Alpha-Reductase Deficiency in Papua New Guinea” describes the clinical data from a joint field study conducted by Gilbert Herdt and the endocrinologist Julian Davidson in 1983 (Herdt and Davidson 1988). Herdt invited Davidson to Papua New Guinea. Davidson was originally trained in classical neuroendocrinology and behavioral endocrinology in animals. His specialization was in rats and dogs and he was well-known for his research into the neuroendocrinology of sexual behavior “of rats and men” (Davidson 1975). Davidson held a number of important positions; he was a Guggenheim Fellow at Oxford (1970-71), visiting scholar at the Battelle Seattle Research Center (1974-75); visiting professor at the University of Illinois (1977) and the University of Athens Medical School (1978-79). He later became a Professor at the Department of Cellular and Molecular Physiology (previously named the Department of Physiology) at Stanford University, California, where he extended his research to the relationship between hormones and sexual behaviors in humans. His research included the role of hormones in sexual arousal and behavior, sexual functioning in general, the influence of pharmacological agents on sexual functioning, and the social and cross-cultural aspects of genetic abnormalities. His publications included *The Biological Basis of Sexual Behavior* (with Gordon Bermant 1974) and he was a founding editor of the journal *Hormones and Behavior*. When Davidson was invited by Gilbert Herdt to join him in the field in Papua New Guinea the challenge was to provide the matching endocrinological data for the psychoanalytical research into sexual culture and identity Herdt had already done with Stoller. Moreover, their research was designed to contest the research by Imperato-McGinley and her research team.

The people discussed in the paper span three generations. Herdt and Davidson give an explanation that shows their perspective on this “natural population” (Herdt and Davidson 1988: 42). In the same fashion as Imperato-McGinley et al., they state that “the intense and genetically close inbreeding of these small Sambia isolates[d] over a long period of time is no doubt related to this remarkably high ratio” (ibid.). Inbreeding as a cause for intersexualized birth is a popular trope for medical explanations of so-called pathologies and Herdt and Davidson evoke this notion here.¹⁰³ The general rhetoric of an

¹⁰³ Jeffrey Eugenides also evokes this theme in his widely read novel „Middlesex“ (Eugenides 2003) and thereby contributes to the commonplace notion that specific congenital “conditions” are produced through human inbreeding. In Eugenides novel it is brother and sister who reproduce. In Papua New Guinea and the Dominican Republic, the so-called gene-pool contains several thousand people.

“isolated population” feeds into the construction of a quasi-experimental setting that uses this population as a laboratory (Klöppel 2008). In both studies, a supposedly “natural” setting of non-Western regions where “intersexuality” appears in larger numbers is constructed to imply that a generic or original natural experiment has taken place. The underlying assumption is that less “culture” has intervened in “nature” in this setting. “Intersexuality” is here understood just as in Imperato-McGinley’s study as an experiment of nature that only functions in “native, untouched, isolated nature” i.e. the less civilized environment of the other. The process of exoticization is hereby inherent; the people who are under investigation are regarded as a homogenous other, which provides the researchers from the West with the perfect laboratory condition. The researchers can position themselves and their research as scientific and objective – the circumstances are even provided by nature herself, which makes this research seem even more justified.

The “high ratio” Herdt and Davidson supposedly find in the Sambia is rhetorically connected to the “isolation” which they connect with “genetically close inbreeding”. In the research in the Dominican Republic the postulation of a laissez-faire environment equally resonates with this notion. This evokes the trope of the primitive on two levels: the cultural/ethnic/racial and the sexual. The intertwining of both levels of rhetoric draws on commonplace notions of bio-medicine and the pathological and seemingly needs no further explanation.

The authors in Papua New Guinea collected information on fourteen people of whom eight were already dead. Of the remaining six they could observe only five, of whom two were children. The three blood samples they took are discussed as “in the range regarded as signifying 5- α -reductase deficiency” with reference to Imperato-McGinley et al. (1974, 1979a,b) – what this range is, is not determined and they do not provide any information about this. They conclude their research on the small-scale sample with the following words:

These findings on a small number of Sambia individuals provide psychosocial, behavioral, and hormonal data supporting the diagnosis of 5- α - reductase deficiency. The Sambia, an isolated tribe of interior New Guinea, provide an excellent example of a *naïve* [sic!] population of 5- α -reductase-deficient males growing up and adapting to the traditional culture without Western medical intervention in their gender development and life-styles. (Herdt and Davidson 1988: 52)

The underlying assumptions of this approach are intrinsically interwoven in a process of othering, which is based on the notion that “growing up and adapting to the traditional culture” (ibid.) is a coherent process without interruption. The traditional culture is seen as a monolithic, non-changing, “naïve” entity, which is constructed as dichotomously different to the West. The West is here constructed as sophisticated and progressive and less likely to produce “inbreeding”. An evaluation or critique of Western medical intervention is not provided. The construction of the object of research, “the people in the other culture”, is based on ethnic patterns, which are derived from specific dichotomies, such as nature/culture, traditional/developed, isolated/interconnected with others. This construction of the other can be read as a process of neo-racialization or ethnicization which functions through cultural references, such as nature, traditional, or isolated. This results in an accompanying homogenization of the culture of the others. Yet, as I will show below, a second rhetorical mode of evoking the primitive on the individual sexual level interconnects in intersexualization.

In 1990 (and 1994) Herdt refers to the research by Imperato-McGinley and compares this study with their own research from 1983 (Herdt and Davidson 1988). In their work they state that they found evidence that “the Sambia [in Papua New Guinea] epitomize a three-sex category culture” and conclude that “the gender differentiation of the pseudo-hermaphrodite cannot therefore fail to be ambiguous, for it is intermediate between the male and female categories” (Herdt and Davidson 1988: 54). Herdt and Davidson claim to have found out in their research in Papua New Guinea that

Sambia recognize the existence of a third category, or third sex of person, the hermaphrodite (*kwoluatmmol*). It is this third sex that we must understand in its own cultural context, to avoid the ethnocentric assumption that all peoples the world over have but two sexual categories identified with the ‘natural’ sexual dimorphism of species, humans included. (Herdt and Davidson 1988: 37)

Herdt and Davidson thus portray the Sambia as having a “three-sex code” (Herdt 1994c), a third category of sex in addition to the two sexes of Western societies. In the first reading, this statement sounds sensitive with regard to ethnocentrism. However, what we can decipher here after a second careful reading is an essentialist discursive move regarding cultural differences as well as a sex-gender-sexuality-system in which medicalization and cultural determinism is implicit. Herdt and Davidson use/assume psychosocial and behavioral data to support their bio-medical findings, but the actual blood and urine samples were taken from three subjects from the Sambia population who show different psychosocial features and behavior. Onto this data they map an extrapolated diagnosis (Herdt and Davidson 1988: 44-50). The information given about the two children consists of stereotypical descriptions of their supposedly ambiguous yet more

male-like behavior as more “passive and quiet”, yet one of them as behaving in a “boyish way”. The information about the adults shows the same pattern. Two of them are described as “never having inseminated boys” (part of the semen practices, see below) but one of them is an enthusiastic fellator and “persisted in homosexual activity” (which as well could be a semen practice he persisted in). The third one “likes to go out with women” but to Herdt’s and Davidson’s knowledge (or assumption) does not “engage in heterosexual intercourse” (ibid.) Another one “uses prostitutes”. The four subjects who did not live their adult lives as men are described as “not married” and “larger” than allegedly normal females. Interestingly, all the psychosocial and behavioral descriptions of the five subjects are (metonymically) reduced to assessments of their sexual activity.

Herdt and Davidson use their own terms and categories to define sexuality and gender. A normal man for them is heterosexual, masculine, “using a prostitute” and sexually active. Those who choose to live as women are pathologized by the fact that they are not married and larger than other women; they are not normal – at least not according to the desired outcomes. Herdt and Davidson use these data to prove their diagnosis of *male* pseudhermaphroditism by pathologizing those who have supposedly not followed their biological calling of living as men. The norm that is used to prove this is a set of heteronormative sex(ualiz)ed and gendered behavior. Self-referencing processes work in a circular fashion. These processes are on the one hand based on the naturalization of the body and on the other on the constitution of Western heteronormative sexuality. Western bio-medicine is produced as a universally applicable and explanatory system which is in turn used to naturalize and essentialize the discourses of psychology and psychoanalysis.

Herdt continues to publish on the data he collected with Davidson and Stoller. In 1990 he published the article “Mistaken Gender: 5-Alpha Reductase Hermaphroditism and Biological Reductionism in Sexual Identity Reconsidered” (Herdt 1990). Herdt writes that “cultures such as our own, which overlay sexual dimorphism in nature upon gender identity development in humans, tend to be essentialist and morally restrictive regarding conceptions of personhood and sexual conduct” (Herdt 1990b: 435). The known culture is conceived of as essentialist and restrictive – obviously in contrast to other cultures which therefore come to be the more “loose” setting of a sex-gender-sexuality-system. Herdt implies a clear distinction between nature (the sexual dimorphism) and culture (gender identity) for Western societies and depicts the other, the non-Western societies as “less restrictive in socialization and more accepting of sexual variations, making of androgyny a significant motif in cultural representations, even in the sacred” (ibid.). Especially in the light of the publication date this quote seems rather out of context. In the USA, the 1980s were a time in which androgyny became a significant motif in cultural representations, even if only in pop-culture. With this quote Herdt implies a dichotomous relationship between the known culture and the other with disregard to recent cultural representations. By producing hermetic and binary portrayals of differences between Western and non-Western cultures, Herdt essentializes these differences and establishes them in relation to the framework of androgyny. Androgyny is derived from the two Greek words *andros*, meaning man and *gyné*, meaning woman. Therefore, androgyny means manwoman. Androgyny signifies and reiterates what Herdt initially wants to see as being overcome in other cultures: the overlaying of sexual dimorphism upon gender identity. Yet, his vocabulary testifies to the epistemology of Western culture in its most explicit form, namely through the use of Greek etymology. His vocabulary prevents the possibility to exit the binary symbolic organization of Western semantics and consequently makes an adequate representation of the “less restrictive” and “more accepting” (ibid.) others difficult if not impossible.

Hermaphroditic identity II

“Mistaken gender” in Herdt’s paper from 1990 comes to mean that the *guevedoche* (in the Dominica Republic) or the *kwolu-aatmwol* (in Papua New Guinea) are not mistaken females but third sexes/genders (Herdt 1990: 442).¹⁰⁴ This, he argues comes from the fact that a “three-category system provides for greater fluidity” in which the hermaphrodite can “switch” “from mistaken female-defined to male-defined hermaphrodite” (ibid.). He proceeds as follows:

¹⁰⁴ The term *third gender* in relation to cross-cultural research appeared first in 1975 in a feminist-motivated anthropological monograph (Martin and Voorhies 1975). In the chapter *Supernumerary Sexes in Female of the Species* Kay Martin and Barbara Voorhies employed the category of *third gender* to draw attention to the anthropological evidence that the two-sex/gender framework of the West could not adequately explain the organization of other cultures. In 1975, the *gender-concept* and the implicit distinction between *sex* and *gender* had already been adapted from Robert Stoller’s *Sex and Gender* published in 1986 by a wide range of (critical) scholars across disciplinary boundaries (see chapter 3). Surprisingly, but emblematically, Martin and Voorhies title their chapter with *sex* and then continue to talk about *gender*. They will not remain the only ones who, on the one hand, establish the distinction while applying it and, on the other hand, conflate the categories just to essentialize the binary sex-gender-sexuality system of the West and colonize with it the organization of non-Western societies as I argue in the excursus.

Only a profound inner sense that one is inexorably female would inhibit such persons from making the structural sex transformation from exposed 'female' to hermaphroditic male. This sense would be an identity state similar to that of the primary transsexual (Stoller 1975), one whose roots are deep in the order of nature of the person. (Herdt 1990:442)

Herdt refers to the second volume of *Sex and Gender: The transsexual experiment*, in which Stoller (1975) extended his research into the so-called discordance between sex and gender in transsexual people. With this reference to Stoller's pathologizing research on transgender people, Herdt naturalizes the third gender as intrinsically male. The question remains why he so insistently criticizes Imperato-McGinley's research as essentializing if he does exactly the same via the supposed natural tendency of the hermaphrodite towards maleness. However, in this paper, he still refers to "mistaken gender". In the version that he extracts and rewrites from this one four years later the only significant change is that Herdt replaces "mistaken gender" with "mistaken sex".¹⁰⁵ The only significant difference of these two versions of the paper consists of Herdt's earlier use of *gender identity* (Herdt 1990: 443), which is replaced by the term *gendered socialization* (Herdt 1994c: 444). The rest of the sentence remains the same as it states that both terms refer to the hermaphrodite as being "not unambiguously male or female" thereby in contemporary discourse implying sex. Merely, in the version from 1994 a sentence of interest follows this one: "the cross-cultural variations reviewed in this essay attest to the importance of gendered signs of identity as cultural and historical achievement, with implications for the emergence in certain times and places, of a third sex" (ibid.). In both papers Herdt interrogates sex assignment and socialization in so-called three-sex-cultural systems. Herdt states that he refutes the "unicausal biological model" to suggest that psychocultural factors in these cultures are prevalent in the development of gender identity. However, his uses of the categories of sex and gender are highly complicated in terms of an essentialization of the former at the expense of the latter. Initially, Herdt agreed that the cultural construction of a third sex, the *kwolu-aatmwol* in the Sambia, is "inexorable" (Herdt 1981: 434). However, Herdt states that continuous field study has made him apprehend "that while Sambia recognize three sexes and at birth sex-assign them as such, their world view systematically codes only two genders, masculine and feminine in cultural discourse" (Herdt 1987; Herdt and Davidson 1988).

Herdt asks whether this society has a "two-sex or three-sex (or more) code for sex assignment at birth" (Herdt 1990b: 434) and refers to Stoller (1968) who argues for the "primacy of sex assignment in the determination of gender identity" and sees "anomalies here with regard to ambiguous sex assignment: that is, the possibility of hermaphroditic gender identity" (Herdt 1990b: 434). Herdt searches for this "hermaphroditic gender identity" and is convinced that he finds it in the Sambia. He seems to acknowledge that "cultures such as our own, which overlay sexual dimorphism in nature upon gender identity development in humans, tend to be essentialist and morally restrictive regarding conceptions of personhood and sexual conduct" (ibid.: 435). Yet he does not acknowledge that, in a similar way, he constructs an overlay of sexual tri-morphism upon gender identity. However, Herdt, in his effort to refute Imperato-McGinley's study, states that:

Contrary to the biomedical explanation, then, my hunch is that the Dominican guevedoche does not experience postpubertal developmental change as being from "female to male". Instead, the transformation may be from "female"—possibly ambiguously reared—to male-identified hermaphrodite, who is, in certain social scenes, categorized with adult males. (Herdt 1990b: 438)

Contrasting this statement and justifying his argument, Herdt refers to a historical/symbolic category in the culture of the Sambia, on grounds of which he assumes that parents and midwives know that some children are born with "anatomical ambiguity" at birth and will experience "dramatic masculinization" at puberty (Herdt 1981). Herdt, thus, concludes that "hermaphroditic infants are sex-assigned as *kwolu-aatmwol*, not as male" (Herdt 1990b: 439). Herdt continues to explain the Sambia's ritual procedure and states that "a key factor of the hermaphrodite's cultural anomalousness is the withholding of puberty rites and marriage in adolescence" (ibid.: 440). This is a punitive reading by Herdt and by no means the only one possible, yet this is an interesting moment where Herdt's focus on male and masculine aspects of this culture becomes apparent. Even though his own study was composed by fourteen people of whom nine were reared as boys and five as girls he focuses on these people who chose to live as men and dismissed those who live as women as pathological.

One may assume that the postulated hermaphroditic identity denotes one that is distinctly different from the male or the female identity; however, this third gender position is reserved for "male pseudohermaphrodites" who live in a male gender role.

¹⁰⁵ This is also quite surprising, since one may presume that Herdt came across Judith Butler's (1990, 1993) work at one point, not just because they were located not far from each other in California, but rather because he is deeply involved in thinking about sex and gender. However, the new paper is nevertheless called *mistaken sex*.

In the four historical cases of sex role change, the female-defined as *kwolu-aatmwol* did not convert to a different role until after their exposure and failure as female. One of them still lives as female. In other words: social catastrophe forced them to change, or else face an unbearable and ambiguous future as not linger clearly female but not yet male-associated pseudohermaphrodites. (Herdt 1990b: 441)

In Herdt's view, the third gender category therefore is reserved for people who, according to his classification of "male pseudohermaphrodites", decide to live in the third gender position, which is clearly male associated. Moreover, in his 1994 paper, which provides no new fieldwork or evidence, Herdt states that his hypothesis of the third sex category is proven by the assignment of hermaphroditic infants as *kwolu-aatmwol* and not as male; as such, infants who are assigned as female are "mistakenly" reared as "normal" females. Herdt, who seems to know the Sambian system better than they do themselves, contradicts his own data and hypothesis by stating:

Yet because the phenomenon has existed for generations and the midwives and mothers go to some lengths to examine the infant's body for signs of the *kwolu-aatmwol*, it is unlikely that a mistake in sex assignment will occur, and only a few instances of such a mistaken assignment, (...) are historically known. (Herdt 1994c: 436)

This argument can be read as either supporting the perception that there is an initial "true" male unmistakable sex assignment because the assignment as female would be mistaken. Interestingly, the third gender is not conceptualized as "really" hybrid but rather as including a tendency to maleness/masculinity. Therefore, most of the descriptive terminology used is related to the concept of effeminacy. Morphological features as well as sexual behavior are measured against masculine/male standards, whereas the female/feminine aspects are disregarded as irritation and proof for the non-normalcy of the person. What happens is a consolidation of hegemonic masculinity and maleness. Male supremacy is again consolidated in this discussion even though the designation of the "true" hybrid is aimed at in these approaches. Herdt consolidates Stoller's "hermaphroditic gender identity" (see chapter 2) and ends up securing masculinity by using terminologies of "effeminacy". The so-called third sex or third gender has therefore a "natural" tendency towards the "first" sex. It is first *andros* and then some *gyne* as the Western concept of the supposedly hybrid Androgyny implies.

The exoticization of an organization of the other culture functions through a homogenization of this other culture as well as of the known culture. The comparison of a biological and socio-cultural two-sex-system with a three-sex-system is explained with bio-medical data of a two-sex-system and the assumption of this socio-cultural system. Another discursive entanglement is again the assumption of a homogenous culture, which is constructed as other. The ethnical/racial othering functions through a biology constructed as universal as proof for the truth of the image of the Western sex-gender-sexuality-system. More explicitly, the truth of the male sex is consolidated here because all the descriptions tend to consolidate maleness, since Herdt and Davidson seek to identify the syndrome of male pseudohermaphroditism. The two researchers seem to take for granted that they can number the biological variety of human beings without falling into the trap of Western (phal)logocentrism, which assumes a concordance between bodily features, behavior and desire. The normative impetus that is laid upon the embodiment, desires and practices of the "other" explicates the workings of universalization of the Western sex-gender-sexuality-system – even though the researchers attempt a diversification of global human nature and practices they homogenize the parameters according to which they measure their data. Herdt and Davidson, however, measure Sambia knowledge against Western standards of bio- medicine and state:

The causes of pseudohermaphroditism are a mystery to the Sambia. They do not understand why some people are born with this condition, nor do they hold explicit beliefs about its causation. In a secret origin myth of parthenogenesis, however, the men view hermaphroditism as primeval foundation of maleness or femaleness. (Herdt and Davidson 1988: 38; also Herdt 1981)

The Sambia have an origin myth which tells that once upon a time the world was originated by their ancestors *Numbugimupi* and *Chenchi*: "two beings of hermaphroditic nature, a blend of male and female anatomy, whose sexual interactions impregnated one and masculinized the other, thus founding society, but also initiating the secrecy on which male power and warfare were based" (Herdt 2003: 109). Herdt interprets this as "homoerotic oral sex and then coitus, leading to birth and the founding of the society". "This cosmic myth", according to Herdt, "explains not only the origins of human society, but the creation of the genders out of the original hermaphroditic state of humankind" (ibid.). The literature Herdt himself has composed on the Sambia implies a more complex story than this quote depicts. Genders are created out of the hermaphroditic state yes, but they have to be created and this creation is a process of rituals, which go on for about twenty years during the life-cycle of male members of this society. Moreover, it seems as if the Sambia hold an explicit belief about hermaphroditism. Hermaphroditism is embedded in the origin myth. To assume that they do not understand its causation is to superimpose the Western

explanation system of bio-medicine. Does bio-medicine have an understanding of why hermaphroditism exists? Western bio-medicine only knows that the dichotomous system of two sexes is constructed and that surgery is used to correct, surgically modify and erase such bodies which they have constructed as abnormal (see chapters 1 and 3).

5.2 Colonizing the Symbolic System of the Other

In the works of Herdt, Stoller and Davidson the biomedical explanation system of the West is superimposed upon the origin myth and the symbolic system of the Sambia. This has its consequences. Only in recent years, the Sambia adopted from the Pidgin trade language the term *turnim man* as opposed to *kwolu-aatmwol*, which is the original indigenous term. Herdt, despite knowing of the history, finds that the notion of the *turnim man*

is apt because it emphasizes (i) the “process-of-becoming” quality, and (ii) the feeling that these ambiguous anatomical beings are driven biologically to be more male-like persons. The Sambia do not understand this biological drive: They think that it is “natural” for these people to transform but they do not believe that they will become normal, unambiguous masculine males. This is why they do not call them “men” but rather *turnim men*: The Pidgin term connotes better than their own indigenous one this transformational “biological drive” attribute. That this is so can be seen from the fact that the *turnim-man* concept is widely used by everyone - men, women, and children - most of whom speak no Pidgin but have simply taken over the concept into their vocabulary slang. (Herdt and Davidson 1988: 38)

Herdt makes this claim despite his knowledge of the creation myth, and privileges the Western model over the indigenous one; the truth claim of the imported, colonizing knowledge system is imposed onto the identity figuration of the Sambia. Most interestingly though, during the course of his research Herdt has given different translations of the word *kwolu-aatmwol*. In 1981 he explains that the Sambia “identify” with two sexes male (*aatmwul*) and female (*aambeli*). In 1988, he states that beside this “sexual dimorphism” Sambia recognize the *kwolu-aatmwol*. The term, he states here, is a compound morpheme referring to “male-like-thing” (*kwolu*) and an “adult person, masculine” (*aatmwul*). This emphasizes the *transformational quality of changing* from a “male-like thing into masculinity” (Herdt and Davidson 1988: 38). In 1990, Herdt states that *kwolu-aatmwol* indexes “male thing-transforming-into-female-thing” (Herdt 1990: 439). In 1994 Herdt translates it simply as “changing into a male thing” (Herdt 1990: 432). Apparently, Herdt was not able to find an accurate translation of the term *kwolu-aatmwol*. However, I suggest that the change of translation in Herdt’s course of research denotes the impossibility to adequately capture what *kwolu-aatmwol* might possibly mean. The semantics of the term eludes Herdt’s attempt to translate the word and thereby the possibility to translate the symbolic meaning.

Herdt, however, does not give up defining the meaning of the term and therefore the position of the *kwolu-aatmwol* in the symbolic and cultural setting of the Sambia. In Herdt’s coordinate system the *true sex* of a hermaphrodite has to be male pseudo-hermaphroditic because Davidson has diagnosed 5 alpha-reductase deficiency which is the biomedical “intersex condition”. This resonates here in Herdt’s preferring of the term *turnim man*. Moreover, to solidify their claim that so-called biological male hermaphroditism has to result in a male gender identity; the *turnim man* can only be healthy and normal if he adopts this particular gender identity. The male biological pseudo-hermaphrodite is therefore normalized into a social male/masculine gender identity. Furthermore, the “process-of-becoming”, which Herdt denotes as a quality that is inherent in the term *turnim man*, is here exclusively readable in relation to the biological imperative to maleness, which again has to result in masculinity. I suggest that this should be put differently: the mature and healthy Sambia *kwolu-aatmwol* adapts through becoming the *turnim man* to Western standards of the heterorelational sex-gender-sexuality-system in which every individual has only one sex and the resulting gender. The Sambia *kwolu-aatmwol* has been colonized by Herdt’s various translation efforts and by the Pidgin.

The intruding research team in Papua New Guinea therefore had the same effect of the one in the Dominican Republic. They discursively impose their truth claims and cause deleterious material effects through their research. One of the children said he “felt ‘shame’ being interviewed” (Herdt and Davidson 1988: 45). “This is understandable”, Herdt and Davidson admit, “since his peers knew he had been singled out as a hermaphrodite in the research” (*ibid.*). This process, therefore, can also be described as a colonization of language and terminology and therefore of symbolic systems; it can be read as a colonializing influence of discursive practices. Robert Young describes the “mechanics of the intricate processes of cultural contact, intrusion, fusion and disjunctions” (Young 1995: 5) and refers to Pidgin and creolized languages which constitute powerful models for the analysis of colonization since “they preserve the real historical forms of cultural contact” (*ibid.*). He furthermore elaborates that “the structure of pidgin – crudely, the vocabulary of one language superimposed on the grammar of another – suggests a different

model from that of a straightforward power relation of dominance of colonizer over colonized” (ibid.). I do agree with Young that a model of a “straightforward power relation” may not make sense in most colonizing settings. However, the superimposition of one language onto the grammar of another denotes, especially in regard to sex-gender-sexuality-systems, violent moves which do not do justice to the socio-cultural grammar deriving from different myths than those of the deterministic bio-medical models of the West.

Identity: a western concept?

The issue that the Sambian meaning of *kwolu-aatmwol* seems untranslatable is further rendered problematic if we take into account that identity categories in Melanesia are constructed differently to those in Western societies. Deborah Elliston notes in her critical encounter with Herdt’s ritualized homosexuality that Herdt’s conception of identities in Melanesia is somehow flawed since identity positions in this culture are

far more flexibly constructed than in Western societies. The Western ‘identity’ construct requires radical qualification for Melanesian societies, as durable for a time period much shorter than a lifetime, and as meaningful in relation to the exchanges of substance, not in relation to an essentialized and internally consistent, individual core person. (Elliston 1995: 853)

Elliston notes that in Melanesia the boundaries between men and women require an extensive amount of work (defined by rituals and rules) and it would be a “mistake to construe these conceptual boundaries in Melanesia as similar to Western boundaries between gender categories” (ibid.). This concept of masculinity and femininity differs from Western notions since these notions require to be produced by social interactions such as rituals; as such, they are not perceived to be “caused” by a biologically grounded morphology (or a biological force), which determines a person’s identity for life. Masculinity and femininity seem to be processes rather than fixed states of being; they need to be confirmed time and time again and they change in their meaning and value according to age and status. This derives partly from the various gendering processes that Marilyn Strathern has described in the Sambian culture, namely that “the gender of people’s sexual organs depends on what they do with them” (Strathern 1988: 211). As such, the emphasis in gender construction lies here on the type of relation or interaction in which the genitals (or sexual organs more generally) are employed. Moreover, Strathern notes that “the unitary identity sets the stage for the revelations that it covers or contains within itself other identities” (ibid.).

Deborah Elliston also discussed Herdt’s problematic introduction of the term ritualized homosexuality. Elliston analyzes how the Western model of sexuality has served to attribute what she calls “semen practices” to a specific sexual connotation “to minimize the assumptions that can be imputed to the semen-focused techniques and ordeals through which boys are ‘made into men’ in some Melanesian societies”, and argues that in such analyses the practices are constructed by Euro-Americans to be “sexual” (Elliston 1995: 850). Elliston furthermore discusses the biological explanations of semen practices and states that these explanations “may be most interesting for what they reveal about Western models of biology and homosexuality” (Elliston 1995: 851). Identity and personhood as Western concepts are also discussed by Elliston, as she juxtaposes these with Melanesian concepts of personhood, which are “arguably far more flexibly constructed than in Western societies” (Elliston 1995: 853).¹⁰⁶

This above-mentioned revealing statement by Elliston applies also to the third “hermaphroditic identity” Herdt and Stoller and Herdt and Davidson have claimed. “Identity” *per se* is a Western concept, which is supposed to be intrinsic to a person and stable through life: not acquired but innate. The term sex is similarly problematic since it implies an entire discursive apparatus that has brought sex into being as the “biological truth” of a person’s identity (Foucault 1978). Moreover, it is an attribution of “sexual significance to what the participants may understand in many other ways”, not just in sexual terms (Hoad 2000: 149). Identity as a category of self is in the Western sense intrinsically tied to its sex-gender-sexuality-system; however, it may not be the case in other cultures.

One key aspect of male personhood amongst the Sambia is the participation in initiation rituals. Herdt observed that the Sambia only rarely initiate *kwolu-aatmwol* into third-stage *ipmangwi* (puberty)

¹⁰⁶ Herdt’s work on ritualized homosexuality in *Guardians of the Flutes* (Herdt 1981) had great impact on the anthropology of sexuality.¹⁰⁶ Baldwin and Baldwin (1989) for example, based their learning theories of sexuality on the data on the Sambia provided by Stoller and Herdt. They develop a universalized learning theory of homosexual and heterosexual orientation via an uncritical adaptation of Herdt’s concept of ritualized homosexuality. Harriet Whitehead argued however, that those anthropologists who have interpreted institutionalized homosexuality and transgender phenomena in terms of bodily desire or psychological predisposition are missing the point (Whitehead 1981). She suggests that “a good many of the cross-cultural investigations have been, explicitly or implicitly, aimed at mustering support for one or another interpretation of ‘our’ homosexuality rather than at laying bare the meaning of ‘theirs’” (1981: 80). She furthermore argues that “on the one hand ‘spontaneous’ desire should be considered independently from institutionalized practices and that on the other hand culturally established operations or acts are better understood in terms of the meanings allocated to them in their specific contexts” (Whitehead 1981: 80).

status.¹⁰⁷ However, at one point Herdt states that he witnessed the *kwolu-aatmwol* Sakulambei's (see chapter 4) initiation into the puberty stage in the 1970s. Yet, Sakulambei's own cohort does not do this, which for Herdt is a sign that Sakulambei's history is supporting "the interpretation of a three-sex code in subsequent socialization" (Herdt 1994c: 439). Herdt believes that the reason for this is because "biological changes in the male body anticipate the subsequent social events" (ibid.) of this third-stage rite which cannot provide the *kwolu-aatmwol* with the power to complete masculinization. Sakulambei has never taken part in the nose-bleeding ritual, which is believed to drain an overabundance of female blood from the body. Herdt suggests that Sakulambei feels that this female element is "part of his core identity" (ibid.). He concludes that "it is no surprise then, that the *kwolu-aatmwol*'s gender-identity state is neither clearly male nor female: they have a hermaphroditic psychosexual identity that is distinctly different, and their phenomenology reveals them to feel unique or alone in the world" (ibid.: 440).

The concept of a psychosexual identity invokes Freudian psychoanalysis and therefore specific Western discourses on the self (I elaborate on the use of psychoanalytical concepts in Herdt's work in chapter 6). Let us again look at the interview with Sakulambei where he uses the word WE when he talks about the process of determining his gender when he was born.

- Sa: They all looked at us at first – "I think it's a girl," that's what they thought. And then, later, they all looked at us and saw that we had a ball [testes], and they all said: I think it's a male."
H: Oh-h
Sa: They all say that. [Pause] And, likewise we've got cocks...and we've got balls.
H: Um-hm.
Sa: But our water [urine] we all lose it in the middle [extreme hypospadias: urinary meatus in female positions, not at the distal end of glans penis as in normal males] (sic! L.E.). Now all the same, could they – would they fix it? [Voice almost cracks from strain, he sounds close to tears.] Or...

(Herdt and Stoller 1985: 140,1)

Herdt and Stoller do not elaborate on this rather interesting fact that Sakulambei switches to the plural when he talks about his body. I do not want to give an interpretation of this yet, though I suggest that the use of the plural might denote a different conceptualization of the relation of the self to the body and might stress a different version of I and embodiment than the one of the West. This passage might suggest that in the Sambian understanding of the individual/person/I/self/embodiment it is not possible to separate the person from his/her environment.

The conception of the self in the Western sense displays a certain focus, which has been explained by Foucault in the *History of Sexuality* in which he argues that sex is constructed as the secret of the self that can be discovered anywhere (1987). A precondition to this conceptualization and perception of the self is a self that is I – an "individual". Especially self-other relations are constructed differently in most cultures but also the construction of the self, which is intrinsically connected to the semiotics that are available in specific languages. Gloria Wekker elaborates on the different ways of being in the world that different languages cause; her example is a rather unexpected one and illustrates her point. According to her "the speakers of American and British English, however close those languages varieties may be, inhabit different worlds" (Wekker and Wekker 1991). From this critical perspective,

Western thinking about personhood is, postmodernity notwithstanding, still characterized by two important commonsense assumptions, which also inform academic studies. In the first place, there is the assumption that a "normal," healthy individual has a fixed core to herself or, more typically, to himself. Even though the situation in which this individual finds himself or herself may change, he or she remains the same person. Individuals, in other words, are seen as fixed, static. The second assumption about the self is that it is bounded, that there is a clear and "natural" distinction and juxtaposition between the individual and society. The preoccupation with an essential interior "I" keeps the boundaries between this inner "I" and outside world intact. Thinking in terms of these two assumptions is not only deeply rooted, it is still often projected unto selfhood in other societies. The person-as-an-island approach constantly reproduces notions of uniqueness, unchangeability, and boundedness. (Wekker 2006: 102/3)

Therefore, the problem of translation of the self and conception of subjectivity has to be radicalized when it comes to the attempt to translate psychic structures from one society to another. Neither psychoanalytical nor bio-medical explanations of the West make sense when it comes to the embodiment of a person whose cultural background and semiotics do not provide a concept of the self that is an individual, who has one singular body and identity.

Henrietta Moore, in a psychoanalytical reading of Herdt's material, which I find rather limited in its rewriting of the Oedipus complex, does however provide some interesting statements on the Sambian construction of the self in relation to non-Western kinship systems. Moore explains convincingly that the symbolic system in the Sambian world involves "an exchange of objects that is constitutive of the psychic

¹⁰⁷ Herdt has published widely on the rites of passage in Sambian culture (e.g. Herdt 1981, 1984).

and social processes that make up the body image, self-other relations and gendered identities” (Moore 2007: 155) and concludes that

sexual identities and the ideas of masculinity and femininity which sustain Sambia understandings of sexual difference cannot be easily reduced to the forms of ‘individuality’, with their concomitant ideas about autonomy and separation, which are often dominant in the West. (Moore 2007: 156)

Therefore, to adapt the concept of the individual to the Sambian notion of identity, or perhaps rather self or subjectivity, seems already to be a mistake. The Western notion of sex being the truth of the person is implicit in the cross-cultural ethnographic research that is conducted by Herdt, Stoller and Davidson. A notion which Moore tackles here as probably inappropriate for the societal organization of the Sambia; at least, she questions whether sex might be related to identity in the same way as in Western narratives. Therefore, by replacing the origin myths by one single psychological and biomedical explanatory model a colonization of another symbolic and lived system of social relations takes place. As Herdt remarked in *The Guardians of the Flutes*, the Sambia “make no distinction between sex and gender – the sexed body and the culturally and socially constituted identity” (Herdt 1981: 168). Moore expands on this in her psychoanalytical reading of the material on the Sambia and elaborates on the ways of becoming a sexed being in the Sambian culture:

A Sambia man lets blood from his nose in the occasion of each of his wife’s periods, thereby linking the maintenance of his masculinity to a cyclical process that rids him of the contaminating effects of femininity. If the male and the female were sufficient, this would not need to be so. Sexual difference is the retroactive consequence of the effects of masculinity and femininity, and of their careful management within symbolic systems and social relations. The irony here is that sexual difference is maintained through its impossibility through the failure of representation to capture in any lasting and fixed sense the distinction between masculinity and femininity. Nose-bleeding reveals that masculine subjectivity is founded on that impossibility which becomes both the ‘how’ and the ‘why’ of sexual difference itself. (Moore 2007: 164)

The point Moore wants to get at here is that “there is no problem about males and females, but there is a problem about masculinity and femininity” (Moore 2007: 160) and that “the irony is that it is gender that creates the problem of sexual difference: it accounts for the necessity of the latter’s repetition; gender is why the male and the female are never enough” (ibid.). I disagree with Moore’s use of the terms of sex(ual) difference and gender because she affirms a fundamental distinction between the two and in her vocabulary there is not exit from the sex/gender distinction. Yet, I regard her analysis of Herdt’s material on Sambian culture in its focus on the effects of masculinity and femininity as enlightening. The consequence that can be drawn from this is that sex(ual) difference never exceeds gendering processes and that different experiences of embodiment cannot be reduced to a western explanatory framework. In Herdt’s account, however, the Sambian sense of bodily experience, which is grounded on the origin myth and a specific form of embodiment, is disregarded and modified according to Western theories of sex-gender-sexuality-systems. In order to justify his hypothesis of the third hermaphroditic gender identity, Herdt exclusively draws on Sakulambei’s case, which seems very different to those of other *kwolu-aatmwol* mentioned above in the paper with Davidson. The *kwolu-aatmwol* can neither be translated into Western discourse nor is the “identity” or position of the different *kwolu-aatmwols* in Sambian culture the same. The *kwolu-aatmwol* cannot be unified as a category, neither from a Western perspective nor in the Sambian symbolic organization.

The philosopher Emmanuel Levinas coined the term “egology” for the subject-centered philosophy of the West (Levinas 1998). He explains this term as referring to the legitimization of the exclusion of the other, whose otherness is performatively produced as part of its own speech. Couze Venn drawing on this concept argued that

the connection with occidentalism is that in the space opened up by colonial conditions, egology found its proof and its measure. At the same time, its discourse, from Descartes, becomes progressively secularized, vested in a specific notion of rationality; it is naturalized in the discourse of Darwinism. (Venn 1999: 51)

The colonization of the self of the other in terms of Western egology is based on the conceptualization of the self as individual and not as connected to other selves. Western discourse is unable to understand embodiment as independent from the concept of identity, which, in the case of Herdt and Davidson, becomes a bio-medical identity. Yet this is not to say that one singular notion of the individual in the West exists either. Melford Spiro in his interrogation of the Western conception of the self as “peculiar” states that “bipolar types of self - a Western and a non-Western - are wildly overdrawn” (Spiro 1993: 116) and that “surely, some non-Western selves, at least, are as different from one another as each, in turn, is different from any Western self” (ibid.:117). Multiple meanings, lived experiences, embodiments and subject(ivity)s are, in accounts on sex(ual)ized/gendered identity and the like, simplified under this one

notion of the individual. Conceptualizations of self vary according to context and modes of expression. However, the hegemonic concept in discourse implies a unified version of this Western self; the coexistence of different dimensions of subject(ivity)s are ignored.

Anthropology and neo-colonialism: Material effects

Gayatri Spivak in her famous article “Can the Subaltern speak” accuses Foucault and Deleuze of neglecting *epistemic violence* because they are, even though conscious about the connection between discourse and power, projecting a white European epistemology onto the rest of the world thereby producing gross universalizations (Spivak 1988). For Spivak, postcolonial studies are also exerting epistemic violence since they ironically reinstall, co-opt, and reinvent neo-colonial imperatives of economic exploitation, political domination, and cultural and symbolic as well as semantic erasure.

Post-colonial theories, so Spivak’s contention, are complicit in creating a neo-colonial epistemic discourse which is inevitably violent since it again silences the other by working with and referring to institutionalized discourses. In turn, these discourses classify and represent the other in the same manner as the discourses and material effects of the colonial asymmetry they seek to dismantle. Any attempt from the “outside”, that is - the West, to ameliorate the colonial condition of the other by “granting” them collective speech invariably will encounter the problems of first a logocentric assumption of cultural similarity among heterogeneous people which happens via the construction of the other as homogenous and second a supposed dependency upon westerners to “speak for” the subaltern rather than hearing them to speak for themselves. The assumption of a subaltern collectivity – the homogenous other – is again reproducing the ethnocentric extension of Western logos – the totalizing, essentialist “mythology” Derrida has described which fails to account for the heterogeneity of the colonized “other” (Derrida 1982). The Western logocentric myths cannot account for the symbolic, cultural, historical systems nor their body politics or their specific conceptualization of subject(ivity)s or even resistance to all of the aforementioned. Even though Herdt’s work cannot claim to be post-colonial; as I argued, it is rather neo-colonial, I suggest, that he is exerting this kind of epistemic violence which Spivak talks about. The following instance of a communication reported in an important anthropological journal testifies to this epistemic violence, yet also to the material violence which Herdt’s work exercised over his ‘interpreters.

In the journal *Anthropology Today* from August 1998 (vol. 14, no 4: 30) a report appears in the miscellaneous section under the rubric “Media” stating that a letter was sent to one of the two major international newspapers of Papua New Guinea, namely the *Postcourier*. According to the report, this letter was signed by a Eastern Highlands people who protest against their government “allowing a well known American anthropologist to study their culture in the 70s and 80s” (30). The letter states that the author’s book is against their customs and that the author did not leave copies of his book at the Institute of Papua New Guinea. The report furthermore states that court action has been taken against this author to claim compensation “for the damage his books *are alleged* to have caused their customs and traditional beliefs” (ibid. my emphasis). The author of the report adds that “the implications of the raising of this issue in the context of “compensating culture” of Papua New Guinea, and the growing awareness of indigenous rights and the power associated with their recognition throughout the Pacific (and elsewhere) is hard to overstate. *A large can of worms may be opening...*” (my emphasis). In the same journal in February 2000 (vol. 16, no 1: 26) in the rubric News Follow-Up we find the note that a “similar letter *purporting* to be from eleven clan representatives has now been received by the American Anthropologist (AN)” (26). This letter was then published together with a response by Herdt whose identity has thereby been revealed. Herdt in the process has “prevailed upon AN to replace the name of the group used in the letter with ‘Sambia’” (the pseudonym he used) in order to “maintain the anonymity of those whose homoerotic rituals” he has described “despite the compensation claimants’ complaint that the term [ritualized homosexuality] is derogatory” (ibid.). Herdt, in his response letter, points out that he has been warned of “unsolicited letters from friends in Sambia” by “unscrupulous efforts of several unemployed Sambia (...) to extract compensation payments” (ibid. my emphasis). Herdt furthermore states that all anthropologists are vulnerable to “accusations of this kind, which may seriously imperil the rights of both anthropologists and the people they write about” (ibid.). Both reports (unfortunately I could not get hold of the letters) are written in an insinuating tone. I have emphasized all the words, which silence the people who speak from a subaltern position. The terms *alleged* and *purporting* are used to devalue first the claims of compensation, second the cause and third the speakers. The fact that Herdt has not left copies of his books in Papua New Guinea speaks for itself and supports my analysis of the profit which Westerners have gained via the knowledge they have produced about “the others” while not letting them participate, neither in the process, nor the consumption of knowledge about their own lives. The mentioning of the “unscrupulous efforts of several unemployed Sambia” furthermore serves to question the integrity of the speakers by insinuating that they are firstly “losers” and secondly only after the money. That Herdt asked the journal to replace the name of the people who he researched and who now claim an authentic position to speak with

the pseudonym he gave them is a further silencing; this, again, implements the authority of the anthropologist. The fact that what Herdt has called “homoerotic rituals” is perceived by the claimants to be a derogatory term is not addressed, which highlights the gap between the anthropologist’s categorization and interpretation and the lived experience of the people studied. The statement in the report that “*a large can of worms may be opening...*” (ibid. my emphasis) is an inadequate phrasing in the first place because it evokes a picture of the Papua New Guineans emerging from their confined and preserved stage into the world, questioning the authority of the anthropologists and furthermore unrightfully claiming rights, power and compensation.

Anthropology helped significantly in the production of knowledge on colonized people in order to administer them. Ethnographic and anthropological knowledge provided systematic information about the colonies for the colonizers to be able to effectively rule them. Jack Stauder interprets the development of anthropology “in terms of the material situation in which it was practiced” (Stauder 1993: 417). The main shift in the colonial geo-political complex is that the United States have replaced Britain as the leading imperialist power in the World. The form of colonizing agendas has changed but not their content. Jack Stauder emphasizes that contemporary anthropological research is as much as any kind of scientific research “systematically shaped and utilized by the dominant interests in our society” (ibid.: 425). Another agenda, besides the one of the colonization of bodies, is the production of knowledge through the appropriation of the bodies of others to enhance Western scientific data. This abstract form of profit achieves its explicit shape when the bodies and psyches under investigation are disciplined, normalized and made to function in this framework. In the context of colonialism medicine has a clearly specific function and always had a “place within a more expansive ideological order and a wider empirical domain” (Arnold 1993: 8). The dominant interest in the cases described above seems to be the dissemination of knowledge about the other for the West and not for the other. The material situation is here relived and reproduced by the silencing of the other and their claim for compensation.

In the 1980s, during the time the research analyzed in this chapter a number of theoretical discussions were brought up explicitly in anthropological debates on the usage of medical modes of interrogation and medical data. In 1986, John de Cecco describes the swing back to the biological theories of the early 20th century in the anthropology of (homo)sexuality (de Cecco 1986: ix). He sees a biological etiology and a biological reductionism at play in anthropological studies of homosexuality and asks for a “psychological detoxification” and an increase in studies that show the “many cultural faces of homosexuality” (ibid.). This quest can be easily adapted to the processes of cross-cultural intersexualization. The fragmenting and essentializing discourses of Western science, in their entitlement to be objective, have managed to colonize not just the embodiments, desires and practices of people in the West, but also in cultures which have not yet given as much credit to Western science to explain their lives and their existences. Bio-medicine in a colonial context inhabits a specific place which is laden with power and cannot be conceptualized without the political context in mind (e.g. Fanon 1965). David Arnold states that “the accumulation of medical knowledge about the body contributed to the political evolution and ideological articulation of the colonial system” (Arnold 1993: 8). Arnold extends his analysis of medicine from a post-colonial and post-modern perspective, which according to him “cannot be regarded as merely a matter of scientific interest” (ibid.). Medicine, according to Arnold “cannot meaningfully be abstracted from the broader character of the colonial order” (ibid.). In intersexualization this broader character of what I call the neo-colonial order is obvious; pathologizing moves which take place here are violent in an epistemic way. “Clinical Anthropology” conducted by Westerners led to a scientific colonization or anthropologization (Knauff 1999) of specific areas of the world and its inhabitants. The process of cross-cultural intersexualization was advanced with the help of psychiatry and medicine to Western categorizations of gender, sex and sexuality. Herdt and his colleagues confine these concepts and “intersexuality” in particular in relation to the Western model of biological determinism.

Today it is acknowledged that anthropology and ethnology/ethnography descend from a tradition of travel reports and the like. Moreover, anthropology arose largely out of the need for colonial administration (Forster 1973); therefore, a certain synergy between economical interests and anthropology cannot be denied (Grosse 2000). The origins of anthropology and its methodologies are thus “colonial”, having emerged in an era when the world was mapped out geographically and politically. This era displayed a particular arrangement of power relations and hierarchies embedded in the expansion of European empires. Colonialism should be regarded as not just a matter of military invasion and economic exploitation; it should also be seen as a practice of imagination through which dominated populations are represented in ways that produce ethnicization/racialization, sexualization and so-called cultural difference. These modes of knowledge production take place on the level of groups of people and on the level of singular embodiments, subjectivities and practices.

Conclusion

Intersexualization in cross-cultural research is intimately connected with Western categories of sex, gender and sexuality. The studies by Herdt, Stoller, Davidson and Imperato-McGinley analyzed in this chapter, represent the Western expansion of an essentializing and normative system. The cross-cultural problematization of the intersexualized body and mind is revived time and time in this body of work in clinical anthropology. The incessant re-evaluation of the phantasm of “intersexuality” continuously creates new theories and is, on the one hand, the motor of professional investigation and, on the other hand, the “test case” for concepts of “normal” sexuality, gender and sex(ual) difference. The studies analyzed here reveal that it is not uncommon for Western scholars to define gender identity in terms of biologically identified categories, even if it is intended to destabilize biological essentialism as in the case of Herdt. The framework of a syndromes invented by Western bio-medical discourse to describe “intersex conditions” (here 5-alpha reductase deficiency) was applied to interpret social behavior, such as change in appearance, interest in certain working duties and so forth. Biological forces to which the subject has supposedly been exposed before birth are brought into motion to explain gender identity as a psychological category (see chapter 2). The implicit masculinist bias that can be detected in Herdt’s, Davidson’s, Stoller’s and Imperato-McGinley’s work only manifests the pathologization of effeminacy and femininity at a universal and generalized level. The hierarchical “natural sex(ual) difference” between man and woman is re-mediated and re-constructed through the newly discovered ontology of hermaphroditism/“intersexuality” in the other culture.

In Herdt’s and Davidson’s account medicine is applied as a cross-cultural/over-cultural system of explanation. The epistemic power they exert is embedded in a colonial move and an extension of Western biopower. This biopower works through the interpretation of a cultural phenomenon/category as a natural and essential feature of the other. Herdt and Davidson first exoticize and then universalize the lived experience and personal embodiment of their interviewees through Western bio-medicine constructed as universal. Their construction of male pseudo-hermaphroditism requires the way they interpret their interviewees’ behavior; as such, they pathologize those who do not live according to standards of masculinity. In the research by Herdt and Davidson analyzed in this chapter the male pseudo-hermaphrodite is categorized on the basis of his biologically induced masculinity and is subsequently normalized if the third gender conforms to this masculinity.

These researchers cannot refrain from the expectation that their endocrinological data will prove that a male hormonal influence produces a masculine behavior. Herdt and Davidson assume that the self is constructed similarly in the Sambian culture as it is in the West; the *kwolu-aatmwol* cannot be heard by them and neither can they integrate the origin myth of the Sambia in their interpretation since they do not regard it as scientific. Valued by them is their fragmenting biological data used to determine gender identity and to understand the cultural system of the other. They assume that the body (interpreted in western biomedical parameters) can serve to understand the cultural systems that human beings have created in different parts of the world works. This assumption works in a circular manner; it reinstalls the continued uncritical reliance on unexamined assumptions about the centrality of the Western heterorelational sexuality. The invasion and colonization of the semiotic and symbolic system of the Sambia via the new term *turnim man* replacing the *kwolu-aatmwol* mirrors the appropriation of the multiplicity of meanings and lived realities. The question of who has the authority to speak and what counts as valuable and legitimate knowledge is in this framework just too obvious. The semiotics as well as the symbolic system of the (neo-)colonizers is superimposed onto the colonized and is supposed to exhaustively explain their cultural and symbolic systems.

Herdt’s research from 1985 to 1994 reveals a proposition in which gender is based on the “natural facts” of sex, even though the culture under consideration does not apply these categories. Western anatomy again gains primacy over gender, which is no longer an ontologically distinct category but merely a reiteration of the category of sex or its consequence. Sex as biologically given hereby becomes naturalized by referring to cross cultural “evidence” of “additional” versions of human existence. These versions are then interpreted through the Western focus on sex, gender, and desire as central categories for the interpretation of societal organization. On the one hand, sexual identity is imposed onto gender identity and, on the other hand, sex and gender as ordering systems are manifested, established and naturalized through their correlation and universality. The postulated third sex and/or gender, therefore, is not the third as a neutral position in the two sex/gender system but always leans towards masculinity. Cross-cultural intersexualization here in disguise as a third sex/gender serves as a localization of “truth” in respect to the materiality of bodies and the formation of subject(ivities). This means that a male sex, a female sex, and a hermaphroditic sex become the preconditions for the existence of a masculine identity, a feminine identity, and a hermaphroditic identity. Sex - as a now threefold biological category - becomes sexual identity and replaces gender. The Third is bound to the supposedly tri-morphic “natural” and universal make-up of sex, gender and sexuality. By disciplining anything that might interrupt the clear-cut

categories of interpretation the original order is reinstalled only with a new taste to it: everything can be included in the Western system of explanation; there is nothing that cannot be grasped with the system of bio-medical knowledge production, everything can be put in the neat boxes that have already been created such as in the case of Imperato-McGinley's research in the Dominican Republic. The compulsion to categorize, seen here, produces a certain knowledge, which is intrinsically linked to the production of power in a two-sex system. In cross-cultural intersexualization, biological determinism and heteronormativity are complicit.

In this chapter I looked at Herdt's claim of the necessity to invent a third category, not just for humans but also for animals. He states that 'as a cultural ideal this category may be perceived and projected into the order of nature' (Herdt 1990b: 442). The question that arises here is the following: Is it necessary to project a new category into the orders of nature if one wants to emphasize that orders of nature are subject to cultural interpretation anyway? Aren't exactly these orders of nature the problem which prevent a reevaluation of the cultural imperative of the two sexes/genders. The tranquility and certainty that is guaranteed by the process of naming and neatly categorizing veils the fact that conquering the world by the power of definition is a colonialist move. By the use of certain metaphors and specific reference systems such as the one of hegemonic masculinity and the construction of the Third has been given a certain place in the order of things; moreover, the Third, as an empty signifier, has developed a life of its own travelling the world as I will explore in the excursus and chapter 6.

Excursus: Bound to The Third?

Introduction

Anthropologists have long been fascinated by cultures which recognize more than two genders (see, for instance, Malinowski 1929; Mead 1950; Kessler and McKenna 1978; Martin and Voorhies 1975). Symbolic organizations which show different, multidimensional societal compositions other than the Western sex-gender-sexuality-system have been used to demonstrate that binary sex/gender is not a universal and obvious biological fact and, as such, that Western conceptualizations of sex/gender are dependent on a range of disciplinary cultural, symbolic and structural regimes. Ethnological findings were thought to challenge the supposed universality of the heteronormative and dichotomous order in Western societies. These ethnological endeavors can be read as the attempt to prove or disprove this concordance. In this context a specific notion of the Third, as a different category than the "first" sex (male) and the "second" sex (female)¹⁰⁸, has had a revival for mediation of knowledge on sex, gender and sexuality. It is this configuration of the Third that will be of interest in this excursus. I argue that the various attempts to fill the concept of the Third with a meaning have taken different forms throughout time. In recent anthropological research, however, the Third has been occupied with the process of cross-cultural intersexualization.

The Third as a category has recently been invigorated by a variety of researchers coming from different backgrounds and disciplines carrying different political and/or academic agendas. The Third has specifically re-appeared in ethnological research as an overall term for an array of diverse forms of human experiences and social, cultural and bodily existence (e.g. Martin and Voorhies 1975; Herdt 1994a). It has been applied to designate and name the relations between experience and socio-cultural and bodily existence – to interrogate what Westerners understand with the term identity. Several forms of living and expression have been put in the same category of the Third. Introductory anthropology textbooks commonly cite the *hijra* of India, the *berdache*/Two-Spirit of native North America, the *xanith* of the Arabian peninsula, and the female husbands of western Africa as examples of a third sex/ third gender (Ortner 1981; Cucchiari 1981; Roscoe 1994, 2000; Herdt 1994a). The concept of the Third has been applied with a variety of different meanings and could be described as a *concept in search of a referent*. In this excursus I focus on the history of the *berdache* and the Two-Spirit movement¹⁰⁹, which re-claimed this history to create something new.

¹⁰⁸ This observation of the first sex as male and the second as female refers to Simone de Beauvoir's *Le deuxième sexe* (1949). From a feminist perspective this hierarchical organization of the sexes/genders is already suspicious because it mirrors the patriarchal structure of Western societies.

¹⁰⁹ I use capitals in Two-Spirit, whenever I designate the movement or the self-identification of a person. In other situation where I explain the term I use it without capitals in line with Terry Tafoya who states that two-spirit is a verb. I think this explanation is apt since I see the emphasis in two-spirit in doing and not in being.

In this excursus, I first highlight anthropological research, which uses the *berdache* as an example of a Third. Hereby, I draw on the etymology of the term *berdache* to exemplify the use of an empty signifier that has traveled through centuries and continents to be rested on different bodies and identities. I chose the *berdache* since researchers nowadays see the positions that persons formerly described as *berdache* as being rightly put as a third (or fifth or fourth) place in relation to the Western binary sex/gender system. Interestingly, the descriptions of the *berdache* tend to feature non-normative maleness. This is a recurrent theme of the Third in anthropological research and highly significant in relation to the male bias that can often be found in research into a supposed third sex or third gender. The next paragraph discusses the Two-Spirit movement which has defeated the foreign (etic/external) term of *berdache*. Here, I introduce the reader to one notion of the third which I do regard as useful (in some theoretical settings) to deconstruct the dichotomous universalized sex-gender-sexuality system. Marjorie Garber has elaborated on the option to use a third in the service of irritation that exceeds the dichotomous organization of things and beings. I then briefly touch upon Homi Bhabha's concept of the third space which he introduced to delineate the move from an "us-them" dualism to a mutual sense of "both/and". By drawing on him, I argue that the Two-Spirit movement can undermine the colonizing move of anthropological accounts of the *berdache*.

The Berdache

For centuries, the term *berdache* has been used by European colonizers to describe people in Native North American cultures who they perceived as different in their role, expressions and lives in regards to the culture they were investigating, yet, more importantly, as different to their known culture.¹¹⁰ Rudi Bleys, in his *Geography of Perversion*, argues that ethnographic information on the *berdache* possibly influenced the debate on hermaphrodites and therefore changed conceptualizations of sexuality and sexual identity substantially (Bleys 1995: 71). I agree with Bleys and suggest that the *berdache*, as a Third, was fundamental for cross-cultural intersexualization. The term *berdache* has an interesting etymology. Narratives on this etymology differ but it seems that this word was first used as *bardash* by the first French colonizers in New France (Canada) and that it originates from the Arabic word *bardaj*, which means "slave" (Marquette 1900 [1674]: n. 26 in Hultkrantz 1983: 459). Angelino and Shedd note in 1955 in their extensively cited paper that

an etymological investigation of the English word "berdache," or "berdash," indicates that it derived from the French word "bardash," which derived from the Italian word "berdascia," which derived from the Arabic word "bardaj," which derived from the Persian "barah." While the word underwent considerable change the meaning in each instance remained constant, being a "kept boy," a "male prostitute," a "catamite"¹¹¹. (Angelino and Shedd 1955: 121)

They furthermore state that there "was no generally accepted concept of berdache" (Angelino and Shedd 1955: 121). However, in most of the early accounts the term was used by colonizers to describe "acts of sodomy" and "transvestism" in North American Native cultures from the beginning of the 18th century (e.g. Bossu 1768 in Angelino and Shedd 1955: 122). Jonathan Katz records even earlier uses in the 16th century (Katz 1976: 285-86). Most of the accounts use the term when they either encounter a person inhabiting a specific social role or a specific choice of erotic object. Mostly explorers and missionaries used the term to describe the supposedly "perverted gender behaviors" and "unnatural sexual practices" (Katz 1976: 288-291). To anthropologists the term *berdache* has in Angelino's and Shedd's time become synonymous with "transvestism and effeminacy" (Angelino and Shedd 1955: 122).

Callender and Kochems composed a comprehensive collection of research into the *berdache* in 1983, which they called "The North American Berdache". They surprisingly do not reflect on the use of the term at all but list 113 cultures, on the basis of an analytical synthesis of published and unpublished accounts, which recognize the "berdache status" although none of them, of course, uses this term. Their extensive discussion, however, shows that there are no common features to be nailed down and that not just every culture but every person expressed his/her identity differently and was differently perceived by their people. One would assume that the heterogeneity of the cultures in North America, however, seems likely to prevent any kind of overall description and lumping together under one term that is not even *emic* in its origin. Any *etic* term would also reflect some of the Euro-American biases that the researcher brings

¹¹⁰ Research on the berdache has never been a unified field. Some claim that the berdache as an institution died out in 1698 (Hauser 1990). Others see this institution revived in current contexts (Roscoe 1994; Trexler 2002) or caution against a subordination of the "native American cosmology to the empire of gender" (Murray 1994). *Berdaches*, moreover, came to be spiritual ancestors for gay activists of the present day. In the following, I focus on accounts which have been quoted frequently by scholars who published on the berdache, either because they are the oldest and most established accounts (Hill 1935; Angelino and Shedd 1955) or because they are the most comprehensive ones (Callender and Kochems 1983).

¹¹¹ The etymology of the term catamite is derived from the Latin *catamitus* and from the Etruscan *Catmite*. *Catamitus* is also known as *Ganymede*; Greek *Ganymēdēs* who was seduced by Zeus and became his lover. The term *catamite* in the history of the ancient world designates the often much younger lover in a male couple.

to the field (see Epple 1998: 268). The neologisms *emic* and *etic* were derived from an analogy with the terms “phonemic” and “phonetic”. They were coined by the linguistic anthropologist Kenneth Pike (1962) who drew the parallel between the two perspectives that can be employed in the anthropological study of a society’s cultural system, with the two perspectives that can be used in the linguistic study of a language’s sound system. *Emic* in this framework means a description coming from within the culture, *etic* is a description of a behavior or belief by an observer, which can be applied to other cultures and is therefore regarded as “culturally neutral”. The *emic/etic* dichotomy leads to issues about the very nature of objectivity and therefore provoked some controversy for example between the cultural anthropologist Marvin Harris (1968) and Pike. Pike believed that all claims to knowledge are ultimately subjective; hence, objectivity is impossible for him. Harris did believe in objective knowledge production and deemed that for anthropology it is necessary to aspire to gain such knowledge in order to be taken seriously as an academic discipline (see also Headland et al. 1990). However, in Callender’s and Kochem’s account this discussion seems to be absent.

One of the early articles on the *nádleehí*, who are subsumed under the umbrella term *berdache* by Callender and Kochems, which was also extensively cited since its publication in 1935, is that by W.W. Hill who did research in Navaho culture. Hill begins his article by stating that “unlike our own society, many primitive societies recognize in a social sense, and include in their culture pattern a place for those people whose psychic or physiological peculiarities set them apart from the normal” (Hill 1935: 273). Hill reports on the status of the *nádleehí* in Navaho cultures and states that “the concept of the *nádleehí* is well formulated and his [sic!] cultural role well substantiated in the mythology” (ibid.). The term *nádleehí* according to Hill’s account has been used for “hermaphrodites” and “transvestites”, while the hermaphrodites are considered to be the real *nádleehí*. Moreover, the *nádleehí* seems to be conceptualized as supposedly male in Hill’s work, which is an interesting feature also in intersexualization as I have demonstrated in chapter 5. In Hill’s account the *nádleehí* he interviewed supposedly does not fit in the special role, which is provided for her_him by the culture. The personal pronouns and the language to address kin and clan members used by the *nádleehí* Hill interviewed did not have one referent but drew interchangeably on both sexes/genders. Hill concludes that his interviewee “has failed to make the personal adjustment which her culture makes possible” which for him leads to the assumption that this “is probably also true of others” (ibid.: 279). Hill’s conclusion mirrors his inability to imagine that this might be not conceptualized as failure by the Navaho culture but as a way of expression of the *nádleehí* position. His report cannot handle the fact that the *nádleehí* might enable multiple and singular ways to handle the cultural position which is offered by the Navaho culture. The contradictory information he gets from his interviewees leads him to assume that single people cannot adjust to a societal position which combines aspects of the other two positions without having to decide or be unequivocally adapted to either or the third. His narrative cannot accommodate the semantic and symbolic difference, which seems to be part of the *nádleehí* subject position. Subsequently, Hill’s interpretation cannot but fail to describe appropriately from an outside position, which is located in a binary sex/gender system. In 1955, at the same time in which Money (see chapter 1) started writing about sex and gender as distinct, Angelino and Shedd review Hill’s account on the *nádleehí* in the Navaho culture. They state that Hill reported that there are “those who pretend to be *nádleehí* who are, according to them transvestites who should be distinguished from the ‘real *nádleehí*’ who are hermaphrodites” (Angelino and Shedd 1955: 125). They conclude from Hill’s narrative that in Navaho cultures there “is a definite differentiation between those individuals who are as they are because of obvious physiology and those who are as they are because of psychology” (ibid.). From Hill’s writing this distinction does not become clear. However, Angelino and Shedd imply that the Navaho make a distinction between real and unreal *nádleehí* on the grounds of physiology. They conclude that “intersexed individuals are special cases and consideration of them from a scientific point of view as *berdache* is to lose sight of the *fundamentum divisionis*” (ibid.: 124). Angelino and Shedd consequently create recommendations of how to write of *berdache* and about who is to be included in the rubric:

In view of the data we propose that *berdache* be characterized as an individual of a definite physiological sex (male or female) who assumes the role and status of the opposite sex, and who is viewed by the community as being of one sex physiologically but as having assumed the role and status of the opposite sex. If erotic object is to be noted it should be so designated by the appropriate adjective: heterosexual, homosexual, bisexual, etc. [...]. While a *berdache* is a transvestite, a transvestite is not necessarily a *berdache*. In no instance is a hermaphrodite a *berdache*. It appears that hermaphroditism is an adequate characterization. (Angelino and Shedd 1955: 125)

Angelino and Shedd here articulate the confusion and helplessness of Western scholars to grasp and describe the *berdache*. However, they seem quite confident in using sexological terms which are related to the discourse that has just been established in the USA. This becomes evident when these sexological terms are used to delineate behavior, desires and roles. They do not yet use the terms of sex and gender; yet, their account exemplifies the distinction between biology and culture. Nevertheless, they want to give

clear guidelines of how to handle this confusion, which are to be followed if one wants to arrive at a general or universal use of the term *berdache*. The ordering system they propose is intrinsically bio-medical; a “definite physiological sex” is presumed according to which the “opposite sex” has to be measured and designated. The ranking of “erotic object choice” is also dichotomously and irreversibly fixed as either homo-hetero-or-bisexual. The note on hermaphroditism shows that the *berdache* has to be clearly delineated from the pathologizing notions of Western bio-medicine. Angelino and Shedd state that “in no instance is a hermaphrodite a berdache” (ibid.). Therefore, they want to understand the *berdache* in simple binary terms – otherwise the formerly mentioned criteria for physiological sex would not apply anymore. Yet, they add that “it appears that hermaphroditism is an adequate characterization” (ibid.) leaving the reader confused as to *what* hermaphroditism is adequate. The hermaphrodite cannot take a position in this system since the notions of same and opposite were to be reviewed. What does become clear here is the desire to fill an empty signifier with a clear set of meanings which obscure the particularities and the impossibility of universalization.

Throughout time, the *berdache* took on several different roles and positions in regards to Western biological and psychological criteria – none of them could unify the researchers. However, research into the *berdache* (and other Thirds) represents a projection of a Western fantasy of an “exotic” symbolic order and other and has been employed for political ends in regards to Western homophobia and transphobia. Nico Besnier states that an identification with *berdache* figures is “understandable in the context of lesbians’ and gays’ struggle for a political voice in postindustrial societies” and also the desire to use these figures to “demonstrate that preindustrial societies are more ‘tolerant’... or ‘accommodating’ of erotic diversity and gender variation than ‘the West’” (Besnier 1994: 316). Morgan Holmes detects that current research about the *berdache*, namely research by Will Roscoe (1994), is driven by gay activist and masculinist agendas (Holmes 2004). Holmes describes this as an ongoing exploitation of the colonized for political purposes, in this case for the enhancement and support of the gay movements in North America in the 1980s and 1990s. Moreover, the tendency to employ and direct the Third towards a consolidation of (here, gay) masculinity is a recurrent trope (see below). Holmes states that “if more recent anthropological work avoids the early finger-pointing behaviours of colonizers and theologically-minded scholars, that does not mean that it avoids the pitfalls of using ‘others’ to further its own domestic agendas” (Holmes 2004: 5). Holmes furthermore traces the history of ethnological research and shows that it is tightly bound to missionary endeavors and the colonial order. In general, whenever the *berdache* is talked about anthropologists assume and base their argument on the Western coordinates of a male and female without explicit deliberation or reflection on indigenous constructions of bodies and sexualities (see Goulet 1996: 685). Kath Weston (1993) criticizes the term *berdache* as another “catch all”-term, which describes and therefore limits this identity position to a position that is again constrained by Western binary terms. Carolyn Epple explored the narratives about the First Nation North American category of the *nádleehi* and writes that:

Ironically, casting them [the people subsumed under the term *berdache*] as such does not subvert but reifies—indeed is based upon—the very system it is intended to dismantle: the binary gender system and its assumed natural coherence among sex, gender, and desire. In setting up *nadleehi* (and presumably others) as belonging to a “third (or fourth, fifth and so on) gender”, theorists reify Man and Woman as binary opposites, using them as standards by which to identify “alternates”. (Epple 1998: 273)

Moreover, as Epple analyses it, “the term *alternate gender* suggests that in mixed-gender behaviors there is evidence for an altogether different gender” (Epple 1998: 267). In fact, any of these terms that are based on notions such as *alternate*, *ambiguous*, *either/or*, *neither/nor* and so on are problematic since they imply the status of a hybrid constellation for the non-normative and in the same vein install the non-hybrid or pure, real and normal character of the two sexes/genders. This kind of anthropological research into third sexes/genders, therefore, wishes to fully understand and describe these complex structures and relationships even though the object is not subsumable under any ONE single category. In their political endeavors to reference other cultures as an anti-homophobic strategy they produce a tautological circle that essentializes and produces othering processes. Towle and Morgan (2002) in their essay on “Romancing the Transgender Native, Rethinking the Use of the ‘Third Gender’ Concept” state that the third gender concept is “by nature flawed because it subsumes all non-Western, nonbinary identities, practices, terminologies, and histories. Thus it becomes a junk drawer into which a great non-Western gender miscellany is carelessly dumped” (Towle and Morgan 2002: 484).¹¹² Moreover, as Hird argues “replacing a two-sex model with a 10-sex (or 20 or 30) model does not in itself secure the abolition of gender discrimination, only perhaps that the mental gymnastics required to justify such discrimination becomes more complex” (Hird 2000: 358). The supposed discovery of third, fourth, or even more genders

¹¹² It has to be added here that in Towle and Morgan’s account the notion emerges that there is a miscellany in non-Western societies, yet, in Western societies, there is uniformity or sameness.

reifies the binary opposition of man and woman rather than disrupting it, and hence imposes sex(ualiz)ed and gendered constructs that may be inapplicable. The assumed rigid, preset meanings for masculine and feminine confer “identity” on a person on the basis of only a few traits and, as such, disregard the complexity of any culture and all subject(ivities). The question remains if an adaptation of the disciplining forces in the production of Western knowledge about identity and embodiment can foster liberation from essentialist and limiting notions. Or does this construction of a third identity position on the grounds of a third morphological category have the effect of making non-heteronormative and non-binary positions only available for specifically medically identified persons and therefore pathologizes these people? Epple’s critique centers on the different uses of Western terms for other people’s “sexuality and gender conceptualizations”. Epple states that future research

should begin with attention to the history of specific cultures, the exploration of multiple systems of meanings (as in other interpretations of Sa’gh Naaghai Bik’eh Hozhb and nadleehi), and the identification of culturally specific and relevant constructs. Such a particularistic focus does not preclude cross-cultural research; indeed, it should enhance intercultural comparison by ensuring that research proceeds from culturally valid classifications. With locally salient meanings finally reinserted, new ways to organize the discourse can emerge, ways that take the analysis beyond gender and sexual practices and redefine the discourse itself. (Epple 1998: 280)

Kath Weston contests the move to employ indigenous categories since she thinks them “as no more neutral in its effects” (Weston 1998: 159). According to Weston, using indigenous terms is intrinsically othering since they construct the subject of inquiry as always and already other. She argues that these “foreign terms” become complicit in a form of Orientalism in which language simply reifies difference and buttresses ethnographic authority. In my eyes this always comes down to the hierarchies that are cemented with the reference to difference. Of course, it is the ethnographic authority which has to be handled very carefully but the question is if there are any terms in the Western anthropologist’s toolbox which do not do the job of othering. Some ethnologists recognized that there are conceptual limitations in the approach to third sexes/genders and that any interpretation is insufficient because of the inadequacy of social and linguistic concepts. Will Roscoe acknowledges that what people write about third sex/gender categories “reflects more the influence of existing Western discourses on gender, sexuality and the Other than on what observers actually witnessed” (Roscoe 1994: 330). Therefore, with the (ab)uses of the category of the Third the problem of generalization of the huge range of immensely diverse cultural categories which have been explored by Western scholars emerges. However, some might not be able to identify as a Third as they consider themselves as totally distinct from the parameters applied to man and woman and, therefore, also from the parameters applied to the Third as they are derivatives from the formerly mentioned (Towle and Morgan 2002). The construction of the Third remains in the Western notion of identity as stable through life and therefore limits again the possibility of identification beyond Western notions of personhood. Being bound to the Third as a morphological, psychological or identificatory category disciplines the perception of the huge variety of identities, practices and processes according to the coordinates of a binary and heteronormative sex-gender-sexuality-system. Moreover, being bound to the Third colonizes the symbolic system of the other culture while silencing that there are also intersexualized and transgendered people in the known culture.

The Two-Spirit movement

The term two-spirit was first coined in 1990 at a gathering of Native Queer/Two-Spirit people in Winnipeg, Canada, as a means to replace the word *berdache*. It is a contemporary term that was adopted from the Northern Algonquin word *nizh manitoag*, meaning two spirits. It is meant to signify the embodiment of both feminine and masculine spirits within one person (Anguksuar 1997)¹¹³ and therefore signifies a different conception to the Western one of sex and gender. To Terry Tafoya, two-spirit is a verb, whereas gay is a noun which one has to read as a metaphoric statement and which is used in the context of a noun signifying a place, person or thing, and a verb being associated with processes, actions and interactions (Tafoya 1992: 256, see also Epple 1998). Qwo-li Driskill¹¹⁴, by referring to Jacobs et al., describes two-spirit as “also a way to talk about our sexualities and genders from within tribal contexts in English” (Driskill 2004: 52). Driskill, in the article “Stolen From Our Bodies. First Nations Two-Spirits/Queers and the Journey to a Sovereign Erotic” writes about First Nations people and embodiment, desires and practices and states that these are

¹¹³ Anguksuar is also known as Richard La Fortune or “Little Man” and organizes International Two Spirit Gatherings.

¹¹⁴ Driskill is a Cherokee Two-Spirit describing himself as Queer poet/activist/educator.

braided with the legacy of historical trauma and the ongoing process of decolonization. Two-Spirits are integral to this struggle: my own resistance to colonization as a Cherokee Two-Spirit is intimately connected to my continuing efforts to heal from sexual assault and the manifestations of an oppressive overculture on my erotic life. Like other Two-Spirit people, I am making a journey to a Sovereign Erotic that mends our lives and communities. (Driskill 2004: 51)

Therefore, the term two-spirit is not a historical term, but rather a neologism that is supposed to resist colonial definitions and to be an alternative to these. Driskill argues that the term is determined to express “our [First Nation people’s] sexual and gender identities as sovereign from those of white GLBT movements” and, furthermore, cautions that “the coinage of the word was never meant to create a monolithic understanding of the array of Native traditions regarding what dominant European and Euro-American traditions call ‘alternative’ genders and sexualities” (Driskill 2004: 51). Jacobs and Thomas state that the term is “a contested compromise to move forward the debate in eliminating culturally inappropriate terms,” and that it is designed to include a wide range of Native people such as: “cross-dressers, transvestites, lesbian, gay, transgendered, or [those] otherwise ‘marked’ as ‘alternatively gendered’ within tribes, bands, and nations where multiple gender concepts occur” (Jacobs and Thomas 1994: 7). However, there seems to be difference between urban First Nation people and those who live on the reservations. Sabine Lang mentions that it is mainly urban contemporary Native American lesbian and gays who started to recover the history of “gender variant/alternate” people of the pre-reservation days as their predecessors. “Two-spirited or two-spirit,” Lang writes, “is the term that is used to refer to themselves to express that continuum” (Lang 1999: 91).

The terms “gender variant” or “alternate” are the new anthropological terms applied in research. Lang uses them although she realizes that it is problematic in terms of the implication of biological or stable sex. Carolyn Epple was explained by one of her Navajo cultural teachers that Navajo people “usually did not talk about genitalia; thus, who was and was not a ‘true’ hermaphrodite may not have been shared beyond immediate family members” (Epple 1998: 271). Lang’s research, moreover, is problematic since she uses the terms “man-woman” and “woman-man” to describe the *nádleehí* people she researched and interviewed. In this manner she falls back into an inadequate, or at least simplifying, scheme of naming something that might not be possible to be named in a different linguistic and symbolic framework. Robert Padgug describes this as an “enshrinement of contemporary sexual categories as universal, static, and permanent, suitable for the analysis of all human beings and all societies” (Padgug 1979: 8). For Padgug, different societies

share general sexual forms [which does] not make the contents and meaning of these impulses and forms identical or undifferentiated. They must be carefully distinguished and separately understood, since their inner structures and social meanings and articulations are very different. (Padgug 1979: 1)

Classificatory processes are based on simplification and are furthermore hindered by the possibility of translating *per se* and of translating complexity. One of Epple’s interviewees states that:

So with *nádleehí*, like the clothing and stuff, that is so artificial, so why make a big stink about it? If you were to look at that person, at all the natural processes [such as the air, sun, etc.] interconnecting to him, that alone would fill up books and books. Then you get to this one part, this artificial part about his clothing. In a drawing of him with all of his interconnections, you’d have to magnify that artificial part a million times even to see it. (Epple 1998: 278)

Any attempt to translate or describe would fail since the complexity and the interconnectedness of lives, people and their culture can only be flattened and therefore misrepresented. It can never be complete. The two-spirit person (here in Navajo culture) is according to Epple’s interviewee seen as “the unique configuration of all natural processes coming into her or him,” not as a handful of traits (Epple 1998: 278). Epple continues to quote her interviewee on his views and he states: “one exists as both, male and female aspects hold as true for *nádleehí* as it does for a mountain, a tree, a woman, or a man.” He goes on: “Everything is two, so how can you have this as a third? You don’t have man, woman, and another” (ibid.). Again, this is interesting to position side by side with Driskill’s statement who says “We simply *are*” (Driskill 2004: 55). Two-spirited people, as the only constant feature of the research on them shows, act and interact to define and redefine themselves, especially in a neo-colonial era. Tafoya describes this dynamic ongoing and shifting process of self-definitions as based on “Native tradition” that “emphasizes transformation and change, and the idea that an individual is expected to go through many changes in a lifetime” (Tafoya: 1992:257). So the term two-spirit seems to be fluid and dependent on situations, interpretations and geo-political positioning by people who somehow identify with First Nation traditions but are wary of constant change not just in these socio-cultural settings but who also have differing self-conceptualizations.

Different writers who, in some way or the other, identify with the term two-spirit state different possibilities of describing and using the term. To Driskill's "knowledge as a non-fluent Cherokee speaker, there is currently no term in Cherokee to describe Two-Spirit people" (Driskill 2004: 55). Driskill explains the complexity and the choice of the term two-spirit accordingly in a footnote: Driskill uses it "because it does not make me splinter off sexuality from race, gender from culture. It was created specifically to hold, not diminish or erase, complexities. It is a sovereign term in the invaders' tongue" (ibid.: 63, n.3). Therefore, for Driskill, the process of translating two-spiritness into "white communities [symbolic and linguistic frameworks] becomes very complex" (ibid.: 52). Therefore, there are many obstacles to translating the differences in symbolic systems. Differing conceptualizations of embodiment, desires and practices are either lost only partially transferred or obscured by colonial processes. However, as a self-empowering term and one that marks distinctions to the governing white/Western mainstream it seems to prove valuable and has also been used powerfully by First Nation people to, on the one hand draw on history, but on the other to emphasize that this history (as all history) is a work in progress. The term two-spirit seems so flexible and under constant re-evaluation and re-definition that it might eventually be a historically correct term to describe the present. It might hold the promise of designating an identity which is composed of multiple sites, existing as a political term in the first place and empowering people while discovering a lost narrative, which they can apply to new narratives. Kimberley Balsam et al, state that

this two-spirit movement is of re-establishing our culture. The two-spirit movement if anything is a decolonization process, to support the Native community and to reclaim those roles we used to have. We're doing this not for ourselves, but for those who can't - those who are young and just coming out, and for elders who haven't felt supported throughout their life. (Balsam et al. 2004)

In this quote it is obvious that the two-spirit movements aim at a decolonization process. Additionally, it shows that the Two-Spirit movement combines the political agenda to support different generations and thereby aims at bringing together past and future. The Two-Spirit movement could be described as being located in three third spaces; in-between generations, in-between genders and in-between colonization and de-colonization. These thirds can be made productive for something new.

The third space

Marjorie Garber in her book *Vested Interests* on cross-dressing argues that "thirds are analytically useful because they upset the binary and encourage flexibility" (Garber 1992: 10). For Garber cross-dressing and bisexuality have the potential to disrupt "easy notions" of binarism and of questioning the "categories of 'female' and 'male', whether they are considered essential or constructed, biological or cultural" (ibid.).¹¹⁵ And she elaborates:

the "third term" is *not a term*. Much less is it a *sex*, certainly not an instantiated "blurred" sex as signified by a term like "androgynous" or "hermaphrodite", although these words have culturally specific significance at certain historical moments. The "third" is a mode of articulation, a way of describing a space of possibility. Three puts in question the idea of one: of identity, self sufficiency, self-knowledge. (Garber 1992: 11)

Garber rejects the idea that the third is principally a word, sex, or specific referent of any kind. Garber is particularly interested in the ability of multiple kinds of "thirds" to disrupt multiple binary categories and symmetries by placing them in larger, messier contexts. To her, it is the task to put the third into a contextualization which takes it out of the dual relation in which it formerly stood and places it in a larger chain. The third to her could serve to reconfigure the relationship of the original dichotomy and to question the "identities previously conceived as stable, unchallengeable, grounded, and 'known'" (Garber 1992: 13). Here, the third has the potential to question binary thinking and to introduce crises.¹¹⁶

Homi Bhabha talks about a third space through which he rethinks assumptions about culture and identity from an "us-them" dualism to a mutual sense of "both/and". I argue that a creation of such a third space can be detected in the two-spirit movement. The third space in Bhabha's notion is a place where identity is negotiated and where people become neither this nor that but their unique subjectivity

¹¹⁵ Garber goes even further to suggest that, far from being a third sexual identity, bisexuality is a sexuality that "puts into question the very concept of sexual identity in the first place" (Garber 1992: 15) (Angelides 2001: 3). Bisexuality, proclaims Garber, is a "sexuality that threatens and challenges the easy binarities of straight and gay" (Garber 1992: 65). In order to make this claim, however, Garber remains reliant upon the very opposition which underpins that of hetero/homosexuality: (sexual) identity versus (fluid) difference. The only difference is that the hierarchical relationship between the two terms is reversed: difference (which in Garber's model is fluid bisexuality) now elevated at the expense of identity (hetero/homosexuality) (Angelides 2001: 4).

¹¹⁶ In Garber's account the transvestite becomes convincingly the Lacanian "intervening term, 'to seem in'" – "the Signification of the Phallus" where the other two either have the phallus or are the phallus. The transvestite as the figure who incorporates the "seeming" (or "appearing" as Garber phrases it) is the substitute for 'having' and for the protection against the threat of loss. And this specific representation only functions in the "psychic economy in which *all* positions are fantasies" (Garber 1992: 356).

(English 2005). Furthermore, the third space is used to signify the place where this negotiation happens and where identity is constructed and re-constructed. It is also a space where life in its ambiguity, complexity, and hybridity is lived and redefined. The notion of the third space opens up potentials for the creation of new structures of authority and for new interpretations of identity as interdependent, temporary, and fluid. Bhabha cautions us that

the construction of the colonial subject in discourse, and the exercise of colonial power through discourse, demands an articulation of forms of difference – racial and sexual. Such an articulation becomes crucial if it is held that the body is always simultaneously inscribed in both the economy of pleasure and desire and the economy of discourses, domination and power. (Bhabha 1997: 38)

To be able to counter the articulation of this kind of difference, Bhabha developed the concept of hybridity. He uses it to describe the construction of culture and identity within conditions of colonial antagonism and inequity (Bhabha 1994, 1996). Bhabha argues that new hybrid identities or subject-positions emerge from the interweaving of elements of the colonizer and the colonized. To Bhabha, hybridity is the process by which the colonizers try to translate the identity of the colonized (the *Other*) within a singular universal framework, but fail to produce something familiar and in this failure produce something new – the hybrid (Papastergiadis 1997). Therefore the hybrid is a representation of cultural differences, which are positioned in-between the colonizer and the colonized. For Bhabha, it is the undefined and indefinite *spaces in-between subject-positions* and identities, which become the space of disruption and displacement of hegemonic colonial narratives (Bhabha 1994, 1996). He conceptualizes hybridity as such a form of liminal or in-between space - the third space. Bhabha is aware of the dangers of fixity and fetishism of identities within binary colonial thinking, arguing that “all forms of culture are continually in a process of hybridity” (Rutherford 1990: 211). However, the history of the concept of hybridity makes its employment problematic since hybridity is historically a violent term describing people who are “mixed-breeds”, so-called products of “miscegenation”. It is deeply intertwined with nineteenth-century eugenicist and scientific-racist discourse (Young 1995; Mitchell 1997; Werbner 1997). Therefore, I do see problems with using it since the references it combines reaffirm the two entities, which are supposedly more “pure” and then merge into the hybrid. The notion of the hybrid in itself implies that there is such a thing as purity, whether it is in relation to identity, gender, body, nationality, ethnicity or origin in general. Moreover, whenever there is a third (no matter if it is an identity, a body, or a space) the first two are implicit and are thought of and listed according to a specific hierarchy. This hierarchy makes one of the two entities the more dominant, hegemonically more justified, debatably more important part and the second one less influential, less important and more likely to be disregarded. The third is always based on a first and a second and these are not free from their hierarchical reference system. Theorizing the hybrid means to recognize that there is no such thing in the first place since everything is hybrid- is difference - difference and composition.

Yet, negative terms do have an emancipatory potential. I think here of queer or gay, the appropriation of which has powerfully undermined the hegemonic discourse on pathologization (Butler 1993). Papastergiadis also asks if we should “use only words with a pure and inoffensive history, or should we challenge essentialist models of identity by taking on and then subverting their own vocabulary” (Papastergiadis 1997: 258). This would be one strategy; however, it only works if there is resonance in hegemonic culture and if there are discourses which can be called upon to counter discrimination. In the case of the two-spirit movement I suggest that, with the use of a term that has no history in a discriminating colonial framework, the appropriation can work better. The two-spirit people can willingly occupy a doubly hybrid position, namely of that between the normative construction of the sexes/genders and that between the colonial and the colonized. The movement emphasizes different subject positions and is wary of not being subsumed under one single notion. Moreover, their appropriation of terms and symbolic references enables many speaking positions in this *third space*.

Bhabha’s *third space* is construed as intrinsically critical of essentialist positions of identity and a conceptualization of “original or originary culture”. Where the colonizers impose a hegemonic and therefore normalizing practice, the strategy of the hybrid opens up a *third space* of/for rearticulation of negotiation and meaning (Bhabha 1996). The *third space* becomes articulation; it becomes a productive and not merely reflective space that engenders new *possibilities*. It becomes a production that disrupts established categorizations of culture and identity. Hybridity can therefore be seen as the antidote to essentialism. Bhabha’s concept of hybridity opens up new anti-essentialist possibilities of conceptualizing globalized identities. If it is applied as a working term in its “purest” sense, meaning that it is not supposed to denote something that is but something in becoming, the third can work in a third space to disrupt binaries and hierarchies. Therefore, a symbolically working *third* can work as a disruption concerning the epistemic violence (Spivak 1988) which has been placed upon Native American cultures by the term *berdache*.

Conclusion

While researchers from the West suggest the flexibility of sexuality, in the same move they invent new accompanying categories such as the *berdache* to produce the same empirical findings time and time again. These findings do not challenge the Western categorization of sexuality but reiterate its parameters by positioning the sexuality of the “other” as “other”. The gaze upon the mind and body of the colonized subject is articulated in the light of the hierarchy of a neo-colonial setting. The societal organizations of non-Western societies are placed together under one rubric – the notion of the Third becomes ontologically universalized. In particular, the addition of the Third (as either third sex and/or third gender) reinforces the categories of male and female as natural, normal and also cross-culturally universal. It is not just the invention of the position of the Third as the third and not, say, the first, and the limitation of the possibly fourth and fifth (and so on) genders/sexes to this single category. Rather, I would argue, the move to draw on bio-medical categories to argue for the historical and social validity of this identity position and the inherent essentializations, which appear in this discourse, are the most problematic. My contention, therefore, is that by juxtaposing all these different accounts, which interrogate different issues in different spaces and different times, the notion of similarity (sameness) rather than difference is evoked. By creating the Third, anthropologists therefore attempt to fill that created “space” with a positive connotation. Yet, the reference system they hereby draw upon only reproduces the dimorphic model of sex and the dualism of gender identity development. The problem inherent is a basic one: while arguing that there are “third categories,” the dichotomous sex(ual) difference between male and female is not tackled (neither in biological terms nor in cultural/social ones). However, I see a potential in movements such as the Two-Spirit movement to defeat and challenge essentialist notions as well as the colonizing impetus in anthropology. Different positionalities and the emphasis on difference and composition can provide discourses that produce counter-narratives especially in post-colonial settings, where people re-claim their history and from this create new narratives and futures.

6. The Fifth Other

Introduction

In this chapter I suggest that the discursive framework from which cross-cultural intersexualization originates can be traced in the disciplinary interconnection between anthropology, sexology and psychoanalysis. I argue that in the interdisciplinary endeavour of cross-cultural intersexualization in anthropology specific tropes were called upon to construct a fifth other – the differently sexed savage. The fifth other, the differently sexed savage, as identified by Lyons and Lyons (2004) denotes the process in which anthropologists construct the other not just on the basis of an “other” culture/ethnicity but also on the grounds of an “other” sexuality. This fifth other, which appears in Herdt’s work as the third sex and/or the third gender, as shown in chapter 5, reflects back upon the means by which (inter)sexualizing and racializing/ethnicizing discourses could be made intelligible. The trope of hermaphroditism/“intersexuality” as “stunted evolutionary growth” or “degenerate” interlock with the discourses of the “other” culture, represented by the “savage” or the “naïve” and “primitive” produce the fifth other in the intersexualized other. To elucidate this process I draw upon the epistemologies of psychoanalysis and sexology at the turn of the 20th century.

In this chapter I analyze Gilbert Herdt’s “Mistaken Gender” (1990) and “Mistaken Sex” (1994c) with a different focus as I did in chapter 5.¹¹⁷ In both essays he uses previously gathered data from the studies conducted with Robert Stoller and Julian Davidson to conclude and sum up his research on hermaphroditism/“intersexuality” in Papua New Guinea. Of central interest in this chapter, however, is his use of the psychoanalytical term of the polymorphous perverse to describe the culture of the Sambia in Papua New Guinea that supposedly epitomizes a three-sex system. By asking for the position of the polymorphous perverse in Freudian psychoanalysis, I will show how a two-fold process of othering can be deciphered in Herdt’s work. The analysis of the trope of *development* in Herdt’s work will serve to exemplify

¹¹⁷ As I described in chapter 5, Herdt elaborated on the deeply inscribed common-sense notion that “sexual dimorphism seems so ‘natural’ and is performed with ‘absolutism’ over sex research in Western culture and science” (Herdt 1990b: 434). However, as useful as this realization is, Herdt seems to not apply, or only partially, this critique to his own research. In 1990 and 1994 he argues for the category of the *third gender* that he grounds in the medical identification of a third sex. The contradiction, which occurs here, lies in the terminology of “mistaken sex” or “mistaken gender”. These terms actually imply that a truth exists either in the body or the mind, which is either “really” male, female or hermaphroditic.

the inherent discursive moves towards cross-cultural intersexualizing research. Underlying this construction are evolutionary theories that go back to the 19th century. Anthropology as the child of colonialism is immersed in these theories and has significantly contributed to a hierarchical ordering of the World via evolutionary notions.

The category of the Third (see also the excursus), which I see as the epistemological sibling of the fifth other has a long history. In 1868, “das dritte Geschlecht” (the third sex/gender) was for the first time used by the German Karl Ulrichs to describe *Urnlinge*, men who have sex with men. The term was later assumed by Magnus Hirschfeld in the *Jahrbuch für sexuelle Zwischenstufen* (1899 - 1923), who worked with the notion of the third in order to find a legitimate position for the newly constructed homosexual. As I show in this chapter, the early sexologists already worked with the concept of the third to describe non-normative expressions of the body and desire yet, it has also been used to put these non-normative expressions into the orders of nature. I argue that intersexualization features here as the interconnection of the processes of homosexualization, bisexualization and racialization. These processes transmit tropes from evolutionary theory, sexology and psychoanalysis, which are deeply rooted in the geo-political situation of Western colonialism in the 19th century and produce the fifth other, the differently sexed savage, which just as the Third is always in search of a referent in these discourses.

6.1 The Polymorphous Perverse

Harriet Lyons and Andrew Lyons describe Herdt’s *Third Sex, Third Gender Beyond Sexual Dimorphism in Culture and History* (Herdt 1994a) as an “extremely influential volume” (2004: 297) in which Herdt brings together various accounts of so-called Thirds through time and space. The title of this edited book can be read as symptomatic for recent developments in ethnological/ethnographical cross-cultural approaches to sex-gender-sexuality-systems. The volume contains a variety of accounts of sex(ualiz)ed and gendered identities in different historical periods and different geographical sites ranging from the Byzantium period to sexology of end of the 20th century, and from the Balkans to India and Polynesia; moreover, this volume is unquestionably an “excellent stimulus to further work along this path” (Conway-Long 1995: 711). Kath Weston and Morgan Holmes praise the collection for not getting trapped in Western notions of what sex this so-called Third “really” is (Weston 1993: 349; Holmes 2004: 4).

There is no doubt that initial motives of ethnologists to interrogate so-called third sexes and third genders incorporated the desire to depict “other” cultures adequately and that they were searching for accurate terms to describe their findings. However, the question remains if this is possible at all. Morgan Holmes, in her article on “Locating Third Sexes”, has noted that “caution is necessary when culturally specific symbolic orders are employed to prove a(ny) point about Western sex/gender systems; the notion of learning from ‘other’ cultures raises serious problems” (Holmes 2004: 5). Holmes states that ethnological research into third sexes/genders is likely to fall into the trap of idealizing the cultures, which are thought of as representing a version of a symbolic order, to be seen as superior to Western limited dichotomous conceptualization of sex and gender (ibid.: 2).¹¹⁸ Holmes, furthermore, criticizes Herdt’s collection for “lumping all the erotic and symbolic elements of these cultures together under one rubric of ‘third sex and gender’ categories” (ibid.: 5). She sees this as a sign that many anthropologists still think “along a dimorphic axis, permitting the occasional disruption to be entertained,” but not actually considering that the so-called ‘third’ might be a ‘first’ or even “one of any of a multiplicity of possible sex categories” (ibid.: 5). In the following chapter, I add one more dimensions of analysis to Morgan Holmes’ critique of Herdt’s work.

The two dimensions, which Holmes criticizes in Herdt’s accounts, are firstly the hierarchical connotation that the third takes on in relation to the first and second sex, and secondly the dimension of the limitation of the multiplicity of categories through the construction of the third. To this I wish to add a third dimension: the implicit construction of the other culture as childlike and uncivilized that permits a third sex/gender. This third sex/gender i.e. hermaphroditism/“intersexuality” is in Western discourse constructed as arrested development and unfinished (see chapter 1), yet, when anthropological research into “intersexuality” is conducted, it becomes cross-cultural intersexualization and combines two othering processes, as I will show in this chapter.

In the preface to his *Third Sex, Third Gender* collection Herdt states that “the hermaphrodite, for instance, may become a symbol of boundary blurring: of the anomalous, the unclean, the tainted, the morally inept or corrupt, indeed, the ‘monsters’ of the cultural imagination of modern Americans” (Herdt

¹¹⁸ This idealization, of course, only started after the onset of the gay liberation movement in the 1970s; before that some anthropologists spoke about Thirds only from a moral to “neutral” perspective. I mapped some of these by using the example of the *berdache* in the excursus. This mapping is intended to guide the reader to a better understanding of how and why the notion of the Third could be established in the first place and which perceptions are the genealogical preconditions for Western research into the sex-gender-sexuality-systems of non-Western societies.

1994b: 17). Yet, as I argue, in “Mistaken Sex”, his own chapter in the collection, he works against this very production of the hermaphrodite as a “symbol of boundary blurring” because he repeats the common move to explain cultural and individual expressions through the framework of psychosexual development and thereby engages in an othering process on the level of the subject and the culture. This move towards cross-cultural intersexualization entails not just the biological essentialization of tri-morphic sex(ual) difference, as I have shown in chapter 5. This complex framework of referencing has another dichotomous component to it: the dimension of the construction of ethnicized and racialized psychosexual difference.

The distinction between sex and gender does not solely rest on the binary between man/male and woman/female but rather on “a scale of racially coded degrees sex/gender difference culminating in the manly European man and the feminine European woman” (Markowitz 2001: 391). This doubly constructed difference is the third dimension which I analyze through an exploration of the fifth other in anthropological knowledge production. In the fifth other a number of tropes merge which make it intelligible and which are drawn upon in order to place it in the “Western order of nature”. I already showed the use of the trope of “unfinishedness” of the intersexualized child in chapter 1, which is used to justify the “finishing” by surgical intervention and treatment. In cross-cultural intersexualization this trope has its equivalent in the trope of *development*.

By drawing on Foucault, this chapter develops a critique of the location of “truth” in bodies and the cross-cultural frame of reference, which wants to make sex “the explanation of everything” (Foucault 1978: 78). With Lyons and Lyons, I argue that Foucault can be criticized for not looking explicitly at the construction of a fifth sexual other (Lyons and Lyons 2004: 101). This lack has not been theorized sufficiently and has led to a neglect of the interconnection of discourses on race/ethnicity, sexuality and gender (see also Stoler 1996). Therefore, in accordance with Lyons and Lyons, I add a fifth other to the four privileged objects of knowledge of “the hysterical woman, the masturbating child, the Malthusian couple, and the perverse adult” (Foucault 1978: 105). In cross-cultural constructions of the fifth other, which stands here for cross-cultural intersexualization the narrative of a continuum of sexual difference in the body and the degrees of racial or cultural difference merge.

The Analogy of racially and sexually coded degrees

The history of the construction of these racially coded degrees in the coordinate system of the “manly European man and the feminine European woman” has already been interrogated by a number of (feminist) researchers (Markowitz 2001; Stepan 1993, 1996, Traub 1999; Young 1995). These constructed and coded degrees rely on analogies and interacting metaphors that only work when congruent with cultural expectations. One could say that these analogies only work when they suggest new hypotheses; new systems of implications and therefore new observations (see Stepan 1996). Stepan elaborates on this process as follows:

Because a metaphor or analogy does not directly present a pre-existing nature but instead helps construct that nature, the metaphor generates data that conform to it, and accommodates data that are in apparent contradiction to it, so that nature is seen via the metaphor and the metaphor becomes part of the logic of science itself. (Stepan 1996: 133)

The similarity that is evoked in these analogies is not something that can be found, but rather something that has to be established. Scientific texts, as Linda Birke puts it, are as any other text: they draw upon “narratives [that] are culturally available; powerful metaphors and gendered fables” are to be expected (Birke 1999: 10).

Herdt introduces such a “powerful metaphor” in his description of the Sambian culture in his chapter in “Mistaken Sex” from 1994. In his attempt to describe the events in which the *kwolu-aatmwol* (see chapter 5) could emerge as what Herdt calls a third sex and/or gender, he searches for the preconditions, which could make such a cultural position possible. Since Herdt’s curiosity circles around circumstances due to which the *kwolu-aatmwol* achieves his/her meaning in the Sambian culture he asks how the Sambian culture could make “androgyny” a significant motif in cultural representation. Herdt answers his own question with the help of the Freudian polymorphous perverse. He states that

polymorphous cultures such as those of the Sambia of Papua New Guinea, by contrast, define persons as more fluid and as relatively male or female, according to social and development characteristics such as lifespan stage, socioeconomic status, and body ritual. (Herdt 1994c: 425)

Herdt applies the psychoanalytic term polymorphous perverse to this “otherness” that he detected in the social construction of the Sambian culture. He states that their permissiveness can be characterized by the Freudian concept of the polymorphous perverse (ibid.). Even though, in the previous section (chapter 1), I

charted the polymorphous perverse as a possible configuration to counter heteronormativity, in this cross-cultural context the polymorphous perverse takes on a problematic position.

First of all, Herdt silences the fact that the Euro-American world also houses intersexualized people who are regarded as differently sexed. What is more, some people claim an intersex(ualiz)ed or transgendered identity and live in subcultures by which they are perceived as such, meaning there are spaces in the West, which are also “permissive” to sexual variance. However, to be able to contrast these two supposedly so different cultures Herdt homogenizes not just the other but also the known culture.

Secondly, in Herdt’s use of the metaphor it remains unclear why the Melanesian society is supposedly polymorphous perverse - is it through their bodies, their desire, their gender system or through their being other? I argue that it combines all of these and merges in their homologous construction into a Foucauldian fifth other – the differently sexed savage.

The concept of the polymorphous perverse in Freudian terms describes a state of being located in an early stage of development in childhood before the infant gains entrance into culture or the symbolic order. The resolution of the Oedipus complex guarantees that the child becomes a sex(ualiz)ed/gendered being and therefore intelligible. Herdt, by referring to a term, which clearly denotes a state of child development that is regarded as prior to “civilization”, describes the socio-cultural system of organization in the “other” *in relation* to civilization. He constructs the other culture in a developmental psychoanalytical framework - cross-culturally. He thereby, I argue, falls into the trap of one of the most common racializing/ethnicizing analogies; that of the positioning of the other at a stage that is less developed, more childlike and primitive in relation to the civilized, sophisticated and developed Western civilization and evokes common themes of the West and the other as lack.

I argue in a similar way as Neville Hoad has done for homosexuality that the theories of “intersexuality” – the processes of intersexualization - are not understandable without looking at the imperial and neo-imperial contexts of such theoretical productions (Hoad 2000). The processes of cross-cultural intersexualization are comparable to Neville Hoad’s emphasis on the emergence of the homosexual through a “hierarchical staging of human difference under the historical periodisings of imperialism and globalisation and the attendant logics of evolution and development respectively” (Hoad 2000: 133). This notion combines theories of the body with theories of the mind which jointly constitute this “one signifier” by “progress through its various others, which are then posited as vestigial, arrested, anachronistic or degenerate” (ibid.: 134).

Anthropologists who follow a postmodern approach have already problematized ethnography as the method of anthropology. James Clifford has argued that ethnographic representations are always “partial truths”; yet, a feminist scholar knows that these partial truths are also “positioned truths” (Lila Abu-Lughod 1991: 142). Postmodern ethnographers (e.g. Clifford and Marcus 1986; Geertz 1973) are, according to Elspeth Probyn, still “united in their use of ethnography as a means of constructing a fundamental similarity of the world’s cultures which is firmly based in the referent of the West” (Probyn 1993: 78). This “referent of the West” is at stake, together with its diverse modes of re-installing itself as the center and the “other” as “lack” in relation to the West as well as its knowledge producers. The referent of the West is in Herdt’s research reiterated in the use of one of the most powerful discourses of the West – psychoanalysis. Even though this culture does not organize itself in the same manner as Freudian 19th century bourgeois Vienna and does not have this history, Herdt uses the concept of the polymorphous perverse to describe psychological processes and the organization of sexuality in the other culture. Herdt’s representation of the Sambian culture as permissive and therefore actually progressive with regards to sexual variation invokes psychoanalysis as a universal discourse. The connotation of this concept however works exactly against the argument Herdt wants to make since the polymorphous perverse implies lack (of sexual differentiation) with regards to civilization and therefore forecloses a perception as progressive.

Lyons and Lyons identify two motivations for anthropological accounts on homosexuality: one, to make information available, which has earlier been distorted and two, addressing contemporary gay political issues. These motivations they state are however, “by no means exclusive but are often merged” (Lyons and Lyons 2004: 295). Lyons and Lyons assert that some “anthropologists are not so much studying the ‘sexuality of the Other’ as implicitly diagnosing ‘otherness’ on the basis of sexuality, even though they have, in many cases, been attracted to their field subjects because of a ‘sameness’ of sexual orientation” (Lyons and Lyons 2004: 305). The study of homosexuality is in this regard very similar to the study of “intersexuality” in anthropology, at least in the accounts by Herdt. With regards to cross-cultural intersexualization Herdt’s quest for an argument for less restrictive and more flexible sex-gender-sexuality-systems in the known produces the other culture as other because of their “permissiveness”.

To adopt the metaphor of polymorphous perverse to the representation of the “other culture” entails positioning it at the stage of immaturity. To use the third sex or the third gender (i.e. the intersexualized) to solidify this claim is to invoke the incompleteness of the hermaphrodite/intersexualized as emblematic for the incompleteness or even childlike primitivism of the other culture. In cross-cultural intersexualization the immaturity of the intersexualized body stands for the immaturity of the culture in

which the intersexualized body can exist as such. In the following analysis I will map out the rationales and tropes, which are evoked and combined in this construction.

Psychoanalysis as a colonial-evolutionary discourse

Sigmund Freud rested his theories developed in *Totem and Taboo* as Kalpana Seshadri-Crooks notes “on the parallels between primitives and neurotics” (Seshadri-Crooks 1994: 190). Freud conceptualized so-called primitive cultures’ minds as fundamentally different to the thinking mode of the logocentric West. To him, the “primitive mind” does not differentiate the mystical from reality; rather, it uses “mystical participation” to interpret and manipulate the world. Freud thereby buys into the imperialist and colonial discourses, which were present at his times; the mind of the “savage” had a specific function in anthropological discourses at the turn of the twentieth century. Lucien Lévy-Bruhl (1857-1939), a philosopher and “armchair anthropologist”, for example, published various texts on the “primitive mind” and the “essential difference between the primitive mentality and ours” (Lévy-Bruhl 1975: 4). Seshadri-Crooks notes that “the difference between the savage and the civilized man is expressed on a diachronic axis, as a temporal difference in ‘our past’ and is not subject to an interchangeability of the actors” (Seshadri-Crooks 1994: 195).

Ranjana Khanna goes much further in her analysis of psychoanalysis concerning its embeddedness in geo-political and historical coordinates. In her book *Dark Continents* she understands psychoanalysis as a colonial discipline, which “allows to see how nation-statehood for the former colonies of Europe encrypts the violence of European nations in its colonial manifestations” (Khanna 2003: 6). Her arguments include the conceptualization of psychoanalysis as an ethnography of nation-statehood and the impossibility of adequately understanding psychoanalysis “without considering how it was constituted as a colonial discipline through the economic, political, cultural, and epistemic strife in the transition from earth into world” (ibid.: 9). Khanna argues for a provincializing, politicizing and historicizing of psychoanalysis, which counters the intrinsic universalizing motions deriving from its geo-political and historical origins. This is needed not only for anthropological psychoanalysis but also for some basic texts by Freud, such as *Totem and Taboo* and *Culture and its Discontents*, which rely heavily on the distinction between the civilized world, the Western capitalist nation states and the so-called savage societies. Namely, in *Totem and Taboo*, Freud borrows from a theory of homology that assumes that ontogeny recapitulates phylogeny, which means that the development of the individual repeats the stages of the development, or the evolutionary stages of the species. According to Khanna, psychoanalysis cannot be thought of without inclusion of the “evolutionary logic that informs Freud’s sense of the growths of repression in civilization” (ibid.: 11).

I argue that not only this notion of growth in repression that enables civilization is problematic but also the evolutionary tropes that are found in his theories on psychosexual development. In 1938, Freud admitted that “I must, however, in all modesty confess that (...) I cannot do without this fact in biological evolution” (Freud 1939: 100). Indeed, Freud profoundly depended on Lamarckian theories to support his claims about so-called psychosexual development. Freud also relied on Charles Darwin’s theories on the arrangements of early human societies and thus located the beginnings of the Oedipus complex at the origins of human society.¹¹⁹ Reading the Freudian concept of psychosexual development, the resolution of the Oedipus complex appears to be the stage in which the child, and culture, leaves the childlike and generic form of an uncivilized being behind and emerges into a “mature” organization between self and others. He enveloped the psychic and social in an evolutionary rhetoric. By temporalizing space, contemporaneous non-European cultures become understood as the representatives of Europe’s past. Through this model the possibility of understanding cultural difference is precluded since it insistently implies that the Western and “civilized”, have already been the “primitive”, the non-Western (Hoad 2000: 142).

Steven Angelides states that the publication of Charles Darwin’s *On the Origin of Species* in 1859 “effectively canonized evolutionary thinking, leaving few spheres of Western thought untouched” (Angelides 2001: 29).¹²⁰ The origins of psychoanalysis and of anthropology, especially the kind of anthropology concerned with sex, gender and sexuality indeed show traits of evolutionism. The

¹¹⁹ Frantz Fanon, for example, has famously disempowered the Oedipus complex as a universally adaptive psychoanalytical structure. Fanon denied the existence of the Oedipus for Martinique mainly because no black father exists to mirror as The Father and, therefore, no a struggle for the mother can take place. He argues that the father is always the White Father, the Colonizing Father - a structural father and not a personal one (Fanon 1986).

¹²⁰ Charles Darwin actually returned from his voyages unconvinced that species had emerged through a naturalistic and mechanistic process of evolution. Gross and Averill mention some interesting theories that Darwin considered to be the reason for change such as the environment acting directly on the womb and hereby modifying descendants (Gross and Averill 1983: 73). However, it was not until Darwin read Thomas Malthus’ *An Essay on the Principle of Population* (1789) that he found a theoretical construction according to which he could frame evolutionary processes in nature. Malthus’ political views of the necessity of a “capitalistic defense of middle class accumulation, expansion and domination” as well as the male control of reproduction found their way into Darwin’s theory of evolution (Gross and Averill 1983: 75).

simultaneous development of the two basic and rival theories of diffusionism and evolutionism in the 19th century created debates about the differing underlying theoretical frameworks. Jack Stauder describes the anthropological tradition around the turn of the 20th century as being “dominated by controversies between diffusionists and evolutionists who held in common, however, an historical and often speculative approach that was primarily concerned with reconstructing the past of mankind” (Stauder 1993: 409). While the diffusionists were interested in tracing widely dissimilar societies back to commonly shared cultural origins and connections, the evolutionists relied on a theory of linear and separate development of societies. This notion of a linear but separate development was based on Darwinian narratives of evolution. Applied to the development of human societies this produced narratives on the evolution of human kind to range from “savagery” to “barbarism” to “civilization” on an evolutionary continuum that can be seen in different cultures. The conclusion drawn in the imperialist era of the end of the 19th century was that “advanced” societies have the responsibility of civilizing “primitive” societies. I argue that the anthropological power/knowledge complex crystallizes in its most material form when it comes to the linking of the “past of mankind” and the evolutionist explanatory framework concerning sexuality.

The so-called “father of anthropology” E. B. Tylor was a crucial figure in establishing evolutionist notions of the development of civilization. He published *Primitive Culture* in 1871 (1958) and *Researches into the Early History of Mankind* in 1865 (1964). Tylor relied heavily on Darwin’s theories and often likened “primitive” cultures to children. To describe the relation between “savage intelligence” and “civilized mental culture” Tylor used tropes from evolutionary theory. He also reasoned that “throughout all the manifestations of the human intellect, facts will be found to fall into their place on the same general lines of evolution” (Tylor quoted in Leopold 1980: 31). The analogy of human evolution and the difference between cultures on the level of the individual and the “species” became a fashionable rhetorical move in anthropology. Tylor often relied on the standard Enlightenment classifications of societies as “savage” and “childlike” or “civilized” (Leopold 1980). Ann McClintock elaborately describes this “vital analogy”. According to her, we can assume that if the “white child was an atavistic throwback to a more primitive adult ancestor” this child “could be scientifically compared with other living races and groups to rank their level of evolutionary inferiority” (McClintock 1995: 50). The adults of inferior groups (“savage cultures”, “non-sophisticated” societies, etc.) must be like the children of superior groups (industrialized societies); the child in this analogy represents a primitive adult ancestor who is thought of as being in the same stage of mental development as the adult of the so-called savage society (ibid.). Stephen Gould puts this in relation to racialization and states that “if adult blacks and women are like white male children, then they are living representatives of an ancestral stage in the evolution of white males” (Gould 1981: 115). He concludes that “an anatomical theory of ranking races – based on entire bodies had been found” (ibid.). Gayatri Spivak, questioning the entire foundation of scientific knowledge production, states that “in fact, if the analogy between primitive peoples and children were not scientific, the fundament of the science would be blown away” (Spivak 1993: 20). I suggest that Herdt’s use of the metaphor of the polymorphous perverse is the foundation for making his claim of the permissiveness of the other towards sexual variation intelligible to his Western audience. However, as I argue, the use of this metaphor is even more consolidated, when intersexualization is at work in the same move.

6.2 The Fifth Other

The influence of Darwinist ideas on categorizations of sex, gender and sexuality has already been widely discussed (e.g. Somerville 1994; Hoad 2003). Siobhan Somerville notes that one of the basic hypotheses within Darwinian thinking was that organisms evolve through a process of natural selection and, therefore, also show “greater signs of differentiation between the (two) sexes” (Somerville 1994: 255). The notion of sexual dimorphism as the pride of evolution and therefore civilization is central to intersexualization, as I also show in section 1. In this evolutionary narrative racialization features even before Darwinism gained influence. Imperialism and colonialism existed before the end of the 19th century and already needed justification and the “inferior other”. Moreover, the trafficking between cultures and continents endangered the purity of the civilized white “race”; miscegenation was a trope that just started causing anxiety. The notion of “mixed-breeds”, so-called hybrid products of a marriage between a “white” and a “non-white” person is deeply intertwined with nineteenth-century eugenicist and scientific-racist discourse (Young 1995; Mitchell 1997; Werbner 1997).

In the 19th century, sex and race, therefore, increasingly came to define social value. Anatomists from this period studied sex and race and according to Londa Schiebinger, positioned the European white male as the “standard of excellence” (Schiebinger 1989: 212). At the end of the 19th century skull size and weight of the brain were used as the indicators for differences in intelligence and its visible and measurable distribution in humans. Craniologists (anatomists studying the human brain) emphasized that “differences between the sexes, with regard to brain size increase with the development of the race” (Schiebinger 1989:

212). It was believed that the difference and, therefore, the inequality of the sexes, increases with civilization and its progress.

The analogy between sex and race, as Londa Schiebinger describes it, has used a variety of reference points differently at different points in time since the 18th century. The early framework of the production of racial differences was rooted in the skeleton, which molded differences into muscles, nerves, and veins. Thus, race, Schiebinger concludes, like sex came to penetrate the “entire life of the organism” (Schiebinger 1989: 211). According to Markowitz, with the beginnings of sexology, the focus shifted to measurements of the pelvis (Markowitz 2001), which was thought equally important for understanding the physical and moral development of the “races”. Londa Schiebinger states that “with pelvis size, sexual (though not racial) hierarchy was reversed. Here the European female represented the fully developed human type, outranking the European male” (Schiebinger 1989: 212). However, this does not mean that European women became the superior “species”; they just became, in a eugenic framework, the best choice for the white man for procreation, reaffirming “blonde heterosexuality” (Markowitz 2001: 404).

The political atmosphere of the 19th century is characterized by male anxieties about women who had just begun to form the first women’s movements. The anxieties about the loss of privilege found their expression in a preoccupation with women’s reproductive ability, (uncontrollable) sexuality, (pathological) reproductive physiology and (hysterical) psychology (Gross and Averill 1983: 81). Darwin’s theories provided the framework to justify the asymmetry between the sexes/genders. In the Darwinian model, sexual behaviour focused on reproduction and the natural selection of males and females according to their role in both reproduction and resource competition (Darwin 1859). This theoretical biological background influenced the notion that human beings are solely organized around reproduction. The core of Darwin’s thought was that the higher the organism on the ladder of life, the more exquisitely differentiated the male and the female of the species. Social Darwinism, was fostered by the publications of Herbert Spencer and others (Spencer 1897). With social Darwinism, the notion became dominant that “it is in the struggle for existence and (especially) for the possession of women that men acquire their vigor and courage” (Angelides 2001: 30). Evolutionary theory and the theory of “natural selection” mirror the patriarchal concern with the newly discovered/construed problem of female “disorder” in the reproductive process; thereby, these theories reveal an obsession with controlling it to maintain the status quo threatened by the emerging feminist movements.¹²¹

In the Darwinist tradition parsed through “natural selection” the differentiation between the sexes became a sign of an evolutionary progress towards civilization. Working within the Darwinian tradition of sexual dimorphism, late 19th century sexology developed the concept that “male” and “female” were innate structures in all forms of life, including human beings, and that heterosexuality was the teleological, necessary and highest form of sexual evolution. The sexologist Havelock Ellis suggested, in terms echoing the Darwinist tradition, that “since the beginnings of industrialization, more marked sexual differences in physical development seem (we cannot speak definitely) to have developed than are usually to be found in savage societies” (Ellis 1911: 13). Angelides quotes Natural Historian Carl Vogt who stated that “it is a remarkable circumstance, that the difference between the sexes, as regards cranial cavity, increases with the development of the race, so that the male European excels much more the female, than the negro the negress” (quoted in Angelides 2001: 34). Iwan Bloch states in *The Sexual Life of Our Time* (1907) that with the progress in civilization the contrast between the sexes becomes “continually sharper and more individualized” (Bloch 1907: 58). Bloch positions the “other” to civilization not just in “primitive conditions” but also “in the present day among agricultural laborers and the proletariat” where, according to him, sex(ual) difference “is less sharp and to some extent even obliterated” (ibid.). Thus, the achievement of sex(ual) difference as a sharp contrast between the sexes is implied to be contrasted between the white middle-class, Western lady and gentleman of the “civilized” world. This contrast, however, needs to be literally mediated by a figure which lies “in-between” the two parameters of sex(ual) difference and racialized/ethnicized - here “class” is also at stake – to make these two continua intelligible.

¹²¹ However, at the same time, different approaches to the organization of society in relation to the newly conceptualized organization of nature emerged. The anarchist Peter Kropotkin, in contrast to Darwin, claimed that human survival and society was enabled by cooperation, not competition. He explains this by referring to most animal species, similarly to Darwin, but reasons that they have survived because of their use of “mutual aid”. Kropotkin argued that the “natural” tendency of humans to cooperate has been diminished by modern social conditions. Kropotkin as an anarchist thinker attributed this development to the emergence of the centralized nation state and the economic logic of capitalism such as competition and the strife for individual survival. Former institutions that supported “mutual aid” among the human species have been replaced by the forces of capitalism, imperialism and the formation of nation states (Kropotkin 1987: 203, 208).

The Third and the fifth other

Carpenter served these two continua with the principle of “the third” in his monograph *The Intermediate Sex* from 1921. He disputed Xavier Mayne’s¹²² direct analogy between biracial people and the “in-between” body of the hermaphrodite/intersexualized, which Mayne positioned as a necessary principle within the natural order. However, Carpenter in his attempt to resist the association between homosexuality and degeneration, which was common in his times, also occasionally, appropriated the trope of “racial mixing”. In *The Intermediate Sex*, Carpenter mainly attempted to free homosexuality from the discourse of pathology and abnormality. Carpenter used the term intermediate sex for homosexuality. He suggested that “intermediary types” existed on a continuum “in-between” the poles of the exclusively heterosexual male and female. Carpenter offered notions of “shades” of sexes and sexual “half-breeds” to assign homosexuality a place in the natural order. He thereby drew on scientific vocabulary, which was dominant in the discourse of racialization. The analogy between the “sexual invert” and the “mixed racial body” was therefore employed in contradictory ways. On the one hand this analogy was used to assign the homosexual a legitimate place within the natural order; on the other hand it was used to evidence degeneration (Somerville 2000: 33). Yet, this contradiction becomes the central feature of the continuum of the natural order in which the “pure” bodies of white heterosexual men and women are positioned at the far end of civilization by reference to the “natural” developmental stages of “in-between”. Carpenter stated that “anatomically and mentally we find all shades existing from the pure genus man to the pure genus woman” (Carpenter 1921: 133).

Patrick Geddes and Arthur Thomson state in their highly influential and widely read 1889 publication *The Evolution of Sex* that “hermaphroditism is primitive; the unisexual state is a subsequent differentiation” (Geddes and Thomson 1889: 80). The notion of natural selection made it possible to view hermaphroditic/intersexualized bodies as anomalous evolutionary “throwbacks”.¹²³ Referring to this history Ulrike Klöppel states that hermaphrodites were therefore regarded as “atavistic monstrosities” (Klöppel 2002: 161). Foucault shows that during the 19th century the hermaphrodite was placed within the category of a monster that disrupts the whole intelligible order and rationalizing apparatus (Foucault 2003).¹²⁴ The assignment of meaning to certain identities, or the construction of these identities in the first place is not to be detached from the subsequent assignment of a place in the order of beings for these newly created identities. This order is hierarchically configured and derives its parameters from the very powerful discourse of what “human nature” or the human species is supposed to be, who can be included and who cannot.

Thus, the hermaphrodite came to be seen as atavistic and unfinished in its development. Degeneration as a term related to evolutionism also entered the debate. Havelock Ellis noted, conflating the homosexual and the hermaphrodite in one term as was common for sexologists, that “strictly speaking, the invert is degenerate” (Dreger 1998: 138). Alice Dreger describes that Ellis disliked the term and made clear he only used it in the most scientific sense, which meant that the hermaphrodite “has fallen away from the genus” (Dreger 1998: 138). “Genus” is Latin and means “race” or “kind”. “Degeneration” derives from the Latin word “generare”, which means to procreate to breed, but also to generate, to foster and to produce. It implies deterioration from the norm in terms of being that kind of human being which is considered to be norm and in terms of being a (re)productive member of society. To degenerate or to be degenerate means therefore on the one hand to not belong to the human race but also to not be generative or productive. Degeneration is inexorably linked to *development* and maturity.

The notion of the hermaphrodite as having “fallen away from the genus” means that intersexualization functions through an exclusion from the norm of the human species and from its subdivision “genus=gender”. In the sexological discourse of Ellis’ time this implies that the “invert” standing here for the homosexual and the hermaphrodite could not or rather should not reproduce; this not only because of the invert’s negation of reproduction that is made consistent through the heterosexual matrix but also because degeneration is inheritable and is also intrinsically linked to eugenics (Barnett 2006). As I demonstrate in chapter 2, the psychoanalyst Robert Stoller argued in 1986 that intersexualized people do not really belong to the human race (Stoller 1968b: 34). Thus, since gender is so made so fundamental for the intelligibility of the human being (Butler 1993), in the case of “intersexuality” gender becomes genus, meaning the human species. The term “genus” here is used in relation to a biological

¹²² Xavier Mayne was the pseudonym chosen by Edward Stevenson to advocate for homosexual rights in America. He wrote *The Intersexes. A Study of Semisexuality as a Problem in Social Life* in 1908.

¹²³ Geddes and Thomson discuss Darwin’s theory of sexual selection at length in the first chapter of their book (Geddes and Thomson 1889: 3-31).

¹²⁴ It was not just the hermaphrodite but also Siamese twins and criminals as well as onanists, and as I argue the fifth other, who were increasingly subject to techniques of normalization. Foucault’s convincing hypothesis is that the powers of normalization, which are at work on these bodies and identities, form a specific mode of power that exceeds the interconnection of medical knowledge and the law. The powers he deciphered penetrated and colonized the newly configured life sciences in the 19th century and are still very much alive in our times.

classification, which is ranked below the term species that refers here to “human being” yet, it is a term that is charged with cultural and socio-political meaning. McClintock describes degeneration as a social figure rather than a biological concept that is linked to the idea of contagion and fears concerning “fallibility of white male and imperial potency” (McClintock 1995: 47).¹²⁵ According to Angelides who works on the trope of bisexuality, which is the epistemological sibling of “intersexuality”, a multiplicity of different disciplinary theories such as atavism, degeneration, and arrested development were unified at this time. In their unification they all reaffirmed the evolutionary logic of the political differentiation of civilized from primitive evolutionary entities (Angelides 2001).

Sander Gilman argues that sexuality is the most salient marker of otherness, organically representing racial difference (1985, 1993). I argue that “intersexuality” serves to organically represent racial/ethnic difference. The interconnection of the tropes of degeneration and the “human race” is made comprehensible in terms of a continuum of sexual dimorphism and racial/cultural difference, which interconnect in the discourses of racialization/ethnicization in intersexualization. Ellis, Bloch, Carpenter and Vogt were not the first ones to draw on this interconnection to make their sexological theories intelligible to their contemporaries. The categories of race, class and sex/gender as well as sexuality are not structurally equivalent; however, through analogy and metaphor they are co-constructs in scientific discourses. Their historical heritage drips into current conceptualizations of cultural and ethnic difference and informs interpretations and explanations of the body, desire and difference.¹²⁶ The interconnection or analogies, which Ellis and his contemporaries built on, are based on a tradition that dates back to the Enlightenment and the beginnings of imperialism and therefore anthropology as a discipline (Stepan 1996; Schiebinger 1993). Not just the material body had to hold theories of inferiority and degeneracy but the categories of “morality” and “social worth” already played into these theories, mainly through craniology. This brand of science only makes sense if social categories are added to the theories pertaining to the differences between racialized and sex(ualiz)ed bodies and identities. Neville Hoad has called this process the “reinscription of biological evolutionism into the sphere of the psychic” (Hoad 2000: 141).

A powerful association between sexual development and “maturity” emerged from the early theories on psychosexual development and sexuality (and therefore later also on gender identity); Freud emphatically stated in 1905, “every pathological disorder of sexual life is rightly to be regarded as an inhibition in development” (Freud 1905: 208).¹²⁷ Jerome Neu in *The Cambridge Companion to Freud* points out that “perverse sexuality is, ultimately, infantile sexuality” (Neu 1991: 185). Infantile sexuality in this Freudian sense requires to be understood as a space of nongenital forms of pleasure. Myra Hird states that “perversions are now associated with ‘regressed’ and/or ‘fixated’ pleasures rather than mature genital love” (Hird 2003b: 1075). Neu furthermore reads in Freud the collapse of “the individual’s experienced concern for genital pleasure together with the biological function of reproduction, so that the development and maturation criterion for perversion reduces to the question of the suitability of a particular activity for reproduction” (Neu 1991: 187). Neu also refers to the “ideal of maturation” which according to him “gives a central role to that function [reproduction] and makes all earlier sexuality necessarily perverse. The infant’s multiple sources of sexual pleasure make it polymorphous perverse” (ibid.). Freud moved from conceptualizing homosexuality as a variant of the sexual function to inscribing it as “arrested sexual development”.

Psychoanalysis, even after Freud, draws heavily on most of the evolutionary vocabulary. The notion of “normal sexuality” became tightly bound to notions of adulthood and “healthy and mature” development, also with regard to cultural differences. This tying of the concept of sexuality to the notion of development relies on analogies and metaphors, which appear in constructions of cultural (or racial) difference as well as in constructions of sex(ualiz)ed/gendered difference. Neville Hoad states that “the difference between the perverse and the normal can only be understood in terms of development” (Hoad 2000: 145). Concerning intersexualization this statement about homosexuality has to be extended to physical “abnormality”. I argue that in intersexualization the discourses of psychological and physiological “abnormality” merge where the terms of development are concerned. Moreover, this “abnormality” is

¹²⁵ McClintock explains the social power of the image of degeneration by referring to the description of social classes or groups as “races,” “foreign groups,” or “nonindigenous bodies,” which “could thus be cordoned off as biological and ‘contagious,’ rather than as social groups” (McClintock 1995: 48). McClintock concludes that the usefulness of the quasi-biological metaphors of “type,” “species,” “genus” and “race” was that they gave “full expression to anxieties about class and gender insurgence without betraying the social and political nature of these distinctions. As Condorcet put it, such metaphors made ‘nature herself an accomplice in the crime of political inequality’” (McClintock 1995: 48).

¹²⁶ Anne McClintock argues that history is not produced around one single privileged social category and that racial and class differences cannot be “understood as sequentially derivative of sexual difference, or vice versa” (McClintock 1995: 61). To her, the determining categories of imperialism come only into being in the historical relationship to each other and emerge, in this relationship in a “dynamic, shifting, and intimate interdependence” (ibid.).

¹²⁷ The rhetorical gymnastics used to justify surgical intervention in intersex-identified newborns also draws on this notion of development. The parents are not told what the physicians diagnosed but what they are thought to be able to cope with best. This is the notion that their child is not fully developed yet and that the physicians have to operate in order to secure full sexual differentiation. See chapter 1 for elaboration on this issue.

construed in evolutionary terms with cross-cultural reference, in order to create a notion of the normal, mature and civilized white and Western binary heterorelational matrix of two distinct sexes/genders.

Bisexuality and hermaphroditism

While Steven Angelides' work shows, which place the concept of "bisexuality" took in all these theories my focus rests on hermaphroditism/"intersexuality". Both categories have at times been interchangeably applied or separated. Bisexuality, as Angelides historicizes it, can be seen "not unlike the evolutionist's 'missing bisexual link,'" which just as the hermaphrodite "served as the dialectical link between the two forces structuring Freud's work: the biological and the psychological" (Angelides 2001: 53). Angelides states that biological or innate bisexuality (see also section 1), which is hermaphroditism in Freud's understanding, "was Freud's link to the natural sciences" and "epistemologically bisexuality was figured not only as the 'other' to sexual ontology itself, but as the liminal figure through which, and against which, racial, gender, and sexual identities were invented as distinctly separate species of humankind" (ibid.: 24). Angelides traces this back to the theoretical developments I have described in section 1 and sums it up as follows:

The universal starting point for all human development, and thus human differentiation, was embryological bisexuality. As children, men passed through physical and psychological stages of bisexuality until maturity, until *(hu)manhood*. Women and blacks, on the other hand, remained children, undeveloped men; or in Irigaray's terms, *sexes which were not ones*. This meant that each of them was therefore a (hu)man that was not one. For it was in the evolutionary process of becoming (hu)man that one was to transcend the physical and psychological animal ancestry of primordial bisexuality. In the Darwinian chain of being, this was an upward movement out of the domain of nature and into that of culture; an evolutionary progression from sexual ambiguity to sexual distinction. (Angelides 2001: 33)

Biological bisexuality – that is hermaphroditism/"intersexuality" in this account – thus held a specific place in the ordering of human nature, not just with regard to sex but also to race/ethnicity. The tropes of *maturity*, *arrested development*, *development* and the definition of what "human nature" is were from this time onwards intrinsically connected. Therefore, the epistemology of (sexological) anthropology cannot be thought without its fifth other, the differently sexed savage. Innate bisexuality was the pivotal epistemic tool that was instrumentalized to keep the crisis of white masculinity of late 19th century at bay. Sexologists worked with tropes used by anthropologists and anthropologists founded a discursive culture, based on sexological terminologies. In the processes of intersexualization all these different strands merge.

The "primitive" or "savage" as a rhetorical figure has gained a special status in relation to the construction of sexuality in this psychological and evolutionary framework. I suggest that the historical conditions that produced the category of sexuality should be considered in relation to their historical colonial heritages and their continual resignification. The emergence of the category of sexuality is intrinsically tied to the categories of sex and gender, which are crucial to the processes of intersexualization but also to the processes of racialization/ethnicization which feature in the disciplines of anthropology and ethnography. The construction of the "other" contains and carries a multi-dimensional reference system that is interconnected in the disciplines of sexology and anthropology.

The analogy between the two narratives – the geographical-anthropological account and the psycho-medical – equals the body and psyche and the foreign country in description, classification and catalogization. Mary Douglas describes in *Purity and Danger* how culture establishes its own boundaries by instating and naturalizing certain (bodily) taboos. These taboos serve to define the appropriate limits and boundaries of culture and thereby constitute bodies, their exchange and their mode of being (Douglas 1966). For Douglas it is only "exaggerating the difference between within and without, above and below, male and female, with and against, that a semblance of order is created" (Douglas 1969: 4). For Douglas, rigid classification systems, such as the classification of humans into two mutually exclusive categories require well-defined categories of rejected and anomalous persons. This can easily be applied to the construction of intersexualized bodies but becomes even more salient when one looks at the cross-cultural construction of the universal intersexualized body.

The clearly defined distinction between male/masculine and female/feminine as a product of these normalizing processes is in its production not just based on the referent of the sex(ualized)/gendered other but also based on the referent of the racialized/ethnicized other. These others become the socio-cultural, geopolitical, historical and psycho-sexual other in juxtaposition to which *the* norm - the white, masculine, bourgeois, Western, civilized, able-bodied, heterosexual man - is produced.

Rudi Bleys writes that "historically, the European construction of sexuality coincides with the epoch of imperialism and the two inter-connect" (Bleys 1995: 106). This argument has been developed further in recent feminist and postcolonial literature (Stoler 1996). What lies at the heart of anthropological configuration of the power/knowledge complex is the "pervasive understanding within anthropology (...) that the human body generates a host of potent metaphorical constructions for ordering the world" (Sharp

2000: 315). But “the metaphors are inappropriate for translating the concepts of the particular culture: they assimilate alien cultural forms ‘too easily’ to European [i.e. Western] categories and conceptions” (Street 1990: 242). The assumption that the “other” culture under investigation uses the same metaphors or signifiers to designate their peoples’ “sex” and “gender” is intrinsically colonizing.

The processes of intersexualization are epistemological siblings of the processes of bisexualization, homosexualization and racialization/ethnicization. These academic disciplines transmit tropes from evolutionary theory, sexology and psychoanalysis, which are deeply rooted in the geo-political situation of the Western nation states in the 19th century. Sexuality, the body and identity are the categories in which analogies of race/ethnicity and sex/gender are used to articulate the norm, the abnormal, the other, the abject, the natural and the hierarchies between them. Normalizing processes that occur in the West are based on references to the Other.

Conclusion

Anthropological research and discourse is colored by evolutionary discourses and notions which go back to the 19th century, which have since provided the foundations from which anthropologists have worked. A similar evolutionary discourse is found in theories about hermaphroditism/“intersexuality” in terms of biological and psychological theories. I have mapped out how they become intrinsically interwoven and how this interface is exemplified by anthropological research by Herdt in Papua New Guinea. The interdisciplinary agendas of medical and psychological anthropology, particularly when it comes to sex-gender-sexuality-systems, are saturated with new concepts and categories that are invented to understand the other.

The described set of ideas shaped sexology at the turn of the 20th century and has its reminiscence in research into sex, gender and sexuality as it developed throughout the 20th century. At the end of the 19th century, the acceptance of Darwinism was total; human beings were conceptually connected with the smallest entity¹²⁸ and the idea of evolution with Man on top was established – that is to say: anthropocentrism in its most explicit form. Every being was considered to have a place in the evolutionary process of creation, and progress was perceived in those species that exhibited the greatest degree of sex(ual) difference, as well as heterosexuality organized around procreation.

The notion of *development* is deeply ingrained in research by Westerners in non-Western societies in which the own culture and gender regime is set as the highest possible form of development and “civilization”. The model of *development* is intrinsically interwoven into the very history of psychoanalysis/psychology, sexology and anthropology and therefore in cross-cultural intersexualization. The call for acceptance of sexual (biological) variation is sought by referring to psychological terminology. With applying the term polymorphous perverse, Herdt evokes the coordinates of arrested development/maturity and savage/civilized. The implicit supposition of non-maturity in terms of societal restrictive interpretation of sex-gender-sexuality-systems and the positioning of the hermaphrodite in this immature organization produces the other as doubly other, as I suggest. The permissiveness of the other to the polymorphous multiplicity of existence is othered through the trope of hermaphroditism/“intersexuality”; subsequently, the system, which allows for it is also othered. Mutual metaphorical affirmations of the two processes work towards cross-cultural intersexualization. The pathological characteristic of the others, their psycho-sexual non-maturity, is reproduced in the singular hermaphroditic/intersexualized body (and non-heterosexual desire) and in the collectivity of the other culture.

Conclusion Section 2

In this section, I interrogated cross-cultural intersexualization in the space, which I demarcate as the Colony. In this space the features of intersexualization, which I have analyzed in the first section of the Clinic are extended upon non-Western cultures.

In chapter 4 on *Clinicalizing the Other* I interrogate how Gilbert Herdt and Robert Stoller interview Sakulambei a Sambian Shaman in Papua New Guinea. The newly invented method of clinical ethnography is applied to extract Sakulambei’s secret. Stoller and Herdt assume that Sakulambei’s secret is connected to

¹²⁸ Over the years and centuries this smallest entity has become smaller and smaller; now we have reached the level of hormones, chromosomes and genes. For a critical analysis of genetics see Fujimura 2006, on endocrinology Oudshoorn 2001.

his body, his sex. What they get to know from Sakulambei and what they translate in the representation of the interview is a production of the Western gaze upon the other. In the case of Sakulambei's intersexualization, which functions through the verbal reproduction of a formerly taken picture of his body, the Western psycho-medical diagnosis is superimposed upon Sakulambei's self representations. Sakulambei cannot be heard in the method of clinical ethnography; yet, the experts from the West intersexualize him.

In the fifth chapter on *Colonizing the Other* I continue analyzing Stoller's moves to cross-culturally intersexualize. With reference to chapter 2 where I analyze Stoller's postulation of a biological force that supposedly infiltrates the brain before birth to cause masculinity I demonstrate how he expanded this notion into the Dominican Republic. With Imperato-McGinley he here attempted to prove the influence of testosterone on the masculine gender identity development of male pseudo-hermaphrodites thereby naturalizing the expressions of hegemonic white male masculinity. Interestingly, Herdt, who formerly conducted research with Stoller, now invited Julian Davidson to contradict the Dominican Republic findings. Herdt and Davidson, in their clinical investigation propose that the Sambias epitomize a three-sex system in which the *kwolu-aatmwool* inhabits a third gender. However, since they equally want to prove the importance of testosterone for a masculine gender identity, their representation also tends towards masculinity. The choice of the researchers to use Papua New Guinea and the Dominican Republic as a laboratory, which they call a "natural experiment" to investigate hermaphroditism/"intersexuality" was motivated by the notion that these others cultures represent a more "original" form of human societal and natural organization.

The standards of technology and societal organization of the West were taken as the indicator of sophistication and civilization against which the "other", "underdeveloped", "primitive" and "savage" was measured via the reference to its position in the continuum of the natural order. In Western societies these productive processes are guided by bio-medical and psychological discourses, which cast human beings in two separate and distinct categories. I argue that adding a third one to this framework of reference only solidifies the logic of classification and categorization. The theoretical space of the Clinic reappears in the space of the Colony. Especially, in Herdt's and Davidson's study the move to superimpose Western notions of identity upon the Sambian culture is a dominant feature. It is assumed that the Sambian culture recognizes the same bio-medical and psychological markers and also deem them "natural", stable and life-long, as Western perception does; the category of a sex(ualized)/gendered identity is a colonizing move on a semiotic and a bio-political level.

In the excursus on *Being Bound to the Third?* I explored the construction of the category of the Third using the notion of the *berdache* as an example. What has brought me to question the specific concept of the Third is the phenomenon that researchers who are occupied with sex-gender-sexuality-systems in cross-cultural studies tend to use the figure of the Third as a term to describe everything that deviates from their Western conceptions of normal maleness/masculinity, femaleness/femininity and heterosexuality. The Third, be it an umbrella term for homosexuality, inter- or transsexuality/genderism, is always already just an empty signifier that gives hints at what it is supposed to count as normal. However, as I demonstrated in the case of the two-spirit movement, the empty signifier of the *berdache* (as a Third) has been reclaimed, dismissed and filled with a new meaning. In a third space, as I argue, Native American two-spirits disassemble their colonial history and compose a new future with a multitude of voices.

In the last chapter on the *Fifth Other*, I return to Herdt's work to look into his use of the psychoanalytical term of the polymorphous perverse as an explanation of the postulated three-sex system of the Sambian culture. I argued that the genealogy of psychoanalysis is intertwined with sexology and evolutionary narratives, which have contributed to the creation of the fifth other, "the sexed savage". I demonstrated that the differently sexed savage was a crucial trope in the 19th century. The "primitive", as a trope derived from and reflected in evolutionary theory, was a prominent feature of anthropology for the explanation of non-Western cultures and thus of the organization of Western societies. The representation of hermaphroditism/"intersexuality", homosexuality and bisexuality as arrested development are intertwined in sexological, psychoanalytical and anthropological discourses. In the case study of Herdt's application of the polymorphous perverse I presented the argument that the fifth other is intensified in cross-cultural intersexualization through making the sexual and racial other intelligible in a Western context and in the modes of Western knowledge production. The fifth other has not ceased to be called upon.

Western models of human nature, their development and expressions are imposed on cultural, political and social formations, which are in the first place thought of as interchangeably more natural, basic, primitive - other. The medicalization that has fostered the processes of intersexualization in the Clinic is deeply influenced by scientific tropes and metaphors that derive from Darwinist discourses and Freudian psychoanalysis that link the body and the mind with discourses on maturity. In the Colony, cross-cultural intersexualization relies upon these tropes and metaphors, yet intensifies them by othering the hermaphrodite *and* the culture in which he_she can exist. The interconnections between these two processes still feature in this body of anthropological research.

Conclusion

With my dissertation I traced the development of the gender-concept in intersexualization and pointed out that it is based on the distinction between sex and gender and the pathologization of any possible incongruence between the two according to a heterorelational system. It was not my intention to present a prescription of how to approach intersexualization. People might have different objectives they want to consider in political action aimed at the discrimination of non-normative gender identities, such as the possibility of surgery (as in the case of transsexuality) or the option to not have surgery (as in the case of intersexualized people).

Intersex activists continue reclaiming their history and challenge being called a phenomenon. In this dissertation I intended to demonstrate that the processes of intersexualization *are* the phenomenon. In order to do this I treated the “experts” in intersexualization as my case studies. I interrogated how these experts make their results plausible, which concepts they draw on and how they position themselves in this endeavor. I thereby focused on the development of the gender-concept in the 1950s, as well as outlining how this concept embodies the epistemology of the West since the 1950s until now. Moreover, I zoomed in on an anthropological researcher’s neo-colonialist moves to explain other cultures by superimposing this epistemology. I developed the concept of intersexualization in the two theoretical spaces of the Clinic and the Colony. My proposal was that in these two spaces the phantasm of “intersexuality” haunts the researchers who pursue the quest to find a viable distinction between men and women and the hermaphrodite/intersexualized.

In line with Foucault, I argued that knowledge is not made for understanding but for cutting. In the case of this dissertation, which engaged in a critical investigation into knowledge production in intersexualization, I played with this quote on four levels. First of all, the knowledge that is produced in intersexualization is made for the cut in the hierarchical dichotomy between the sexes/genders. This cut works on the premise that there are men and women who behave in a certain way and inhabit certain roles in society which subsequently require securing to protect the status quo of the hierarchical split. The second cut that is made is in the distinction between sex and gender, which is the cut between the morphological and the social or psychological. Researchers in intersexualization, as I have demonstrated, use this cut to determine the normal congruence between the two; women are supposed to have a specific morphology and men another. If this is not the case or if this congruence is somehow at stake then the mode of cutting enters the sphere - the separation between the normal and the abnormal. This is based on the congruence or incongruence of sex and gender. If the sex of a body cannot be identified properly or if the identity of the individual does not align to the body from which it should follow, it is determined abnormal. The fourth layer then enters the realm of intersexualization. This fourth level refers to the surgical practices in intersex management which use the scalpel to guarantee the first level of the distinction between the sexes/genders and the second of aligning the morphology and the social or psychological. The cut in intersexualization is represented by the actual cut into the flesh of the body.

However, I acknowledge that through my position as a researcher who composes a genealogical account I also cut. Yet, I hope that I contribute to the growing understanding of how intersexualization works. In this dissertation I decided to use certain moments in history of knowledge production to interrogate a specific body of knowledge. I made a decision between those knowledge productions which I considered as important and those which I do not see as equally influential. I also cut out the specific time frame of the period after the Second World War and the period of the late 1970s to early 1980s in which the theories of the 1950s were recycled in research on other cultures. Therefore, I also made a geographical incision, namely by focusing on researchers in the USA and their travels to Papua New Guinea and the Dominican Republic. As a researcher I have chosen particular instances in the processes of intersexualization to show how they work at exactly these points in time and space. I slice time and space and according to importance and relevance for my argument. My contribution to understanding, however, is how these cuts are made and how these lines are drawn in the first four areas in the particular historical instances I analyzed.

It is important to state that I consciously chose to not explain what so-called “intersex conditions” or Disorders of Sexual Development are. I deliberately avoided repeating the cut between the normal and the abnormal. With this dissertation I tried to avoid being complicit in the repeated articulation of diagnoses, which medicalize and pathologize bodies not in medical need of surgery. Only in a few so-called intersex conditions are surgeries medically necessary.¹²⁹ Most of the surgeries, which were and are still performed, serve to consolidate heterorelational sexual difference and clear-cut gender identities. The fact

¹²⁹ Some cases of CAH have severe salt loss which can be deadly. They require treatment; however, this does not require the diagnosis of “intersexuality” or DSD.

that surgeries are performed on some bodies to align them to sexual dimorphism only proves that the cut in sexual dimorphism is a phantasm.

This fantasy, however, is constantly reaffirmed in the processes of intersexualization. Multiple theories and references are called upon to establish the norm of the two sexes/genders as the natural expression of sexual difference. Medical and psychological experts apply a framework of the normal, which I have called the “operation theatre” and make it seem natural. This “operation theatre” is prepped with neo-psychoanalytical theories such as gender role and gender identity, or by actual surgical tools such as the scalpel.

I intended to show in this dissertation that intersexualization since the 1950s in John Money’s and Robert Stoller’s research is based on the distinction between sex and gender. In their intersexualizing research the gender-concept was invented in order to determine what is normal and what is abnormal for a body to behave and to feel. The quest for a scientifically verifiable distinction between men and women is pursued in the theories which invent categories such as gender identity and gender role; yet, this always comes down to biological determinism, even though gender as the verification tool is called upon as in the case of Caster Semenya. The decision in the social is first made on the morphological level; then, the social separation is reaffirmed on the basis of sex verification. Semenya can only continue to run in the women’s camp if her body testifies to the parameters of femaleness.

Of course, at different moments during the last fifty decades Money and Stoller had developed their theories while shifting their emphasis. “Intersexuality”, as Homes states, is a shifting phantasm in medical discourse which is constantly rearticulated, rephrased and modified. However, in this dissertation, I focused on particular moments in the history of intersexualization which were crucial for the treatment paradigm to be established and the gender-concept to be verified by the invention of the third sex and third gender. This was later adapted by Herdt to explain the culture of the Sambia in Papua New Guinea.

I focused on the research by Money and Joan and John Hampson in which they created a field of expertise that constantly feeds itself by creating the problem of “intersexuality”. I demonstrated that their sample of “patients” showed no significance in regards to psychopathology. Moreover, I showed that there were adult women who had “phallic flesh” and that psychotic symptoms were absent. However, Money and the Hampsons disregarded their results and draw the conclusion that surgical intervention on infants is necessary to secure a stable gender role. That Money et al. were able to do this reflects developments in the waxing privileges of psycho-medical experts since the scientific revolution; these developments tell us who we really are, or rather who we should be. Numerous explanatory systems are developed and bound together to find new ways of defining individual status and social order. I focused on their publication series since the treatment recommendations they proposed are still in place. Notably, these recommendations had atrocious effects on now living adults who were diagnosed as psycho-sexual emergencies and subjected to surgical intervention as infants. Some of these adults speak out now and challenge the mutilating practices in Western hospitals. Recently, far reaching discussions also inside of the medical establishment have begun and researchers review their treatment paradigms. However, the new nomenclature of Disorders of Sexual Development is emblematic for the knowledge production which is not made for an understanding of the multiplicity of bodies. Rather, it advocates the continuous cut between the normal and the abnormal. Endocrinology, genetics and neuropsychology are only the tip of the gender iceberg, as Anne Fausto-Sterling calls it. With these conceptual tools in hand, scientific experts proceed through bodies, penetrate tissue and colonize the psyche in order to find verifiable distinctions, in accordance with the requirement and circumstances of the socio-political atmospheres. In my introduction on *From Myth to Medicalization* I described the dawn of the heroic age of the scientist as a colonial agenda, which diagnoses and gives names, categorizes and classifies human beings in order to assign them a place in the orders of nature. The phenomenon of intersexualization produces the notion of an “experiment in nature” and then denotes it as “abnormal”. Intersexualization then erases the non-normative through surgery to reaffirm the norm. The cut is the normative cut of a heterorelational organization of the sexes/genders.

Just as intersex movements gain power and challenge medical expertise, the term “intersex” has been replaced by the term Disorders of Sexual Development. DSD is a term which silences the fact that surgery produces embodiment (Roen 2009). DSD veils the effects intersexualization has on the embodiment of intersexualized infants and limits the space of possibility for embodiment without surgical experience. Moreover, it reinstalls the notion of development, which I have analyzed as being a basic feature of (cross-cultural) intersexualization. To reinstall the notion of disorders in sexual development is to call upon these discourses and to pathologize that which disrupts the heterorelational organization of the sexes/genders. In the section on the Clinic I demonstrated how John Money and Robert Stoller, in their psychological and psychoanalytical theories of gender role and gender identity, appropriated concepts such as innate bisexuality, sexual identification and psychosexual maturity. These concepts are modified in their intersexualizing theories in relation to the postulated necessity of a development towards a heterosexual monosexuality. Intersexualization has thus a specific place in the order of theories on “normal gender identity development” and “normal sexual differentiation” since the category of “intersexuality” is

the foundation for re-formulations of the norms of maleness and femaleness as well as femininity and masculinity. Stoller invented the category of core gender identity to argue for an innate biological force (sex) that causes the feeling of being female or male. He later added a hermaphroditic core gender identity to these two and installed a third available position on the basis of biological determinism. However, for this third identity he created a category that according to him not really belongs to the human race. He also advocated surgery to normalize individuals whom he assigned this category (Stoller 1968b). Stoller's move testifies to the need of categorization dominant in psycho-medical intersexualization. I identified this as the rhetorical mode of first naming the exception to the norm to then normalize it; it is the production of a hierarchy of the normal in the so-called natural.

Yet, as I have tried to show, when intersexualization enters the space of the Colony, the notion of development produces a second rhetorical mode with regards to the Western orders of nature. In the space of the Colony the designation of hermaphroditism/"intersexuality" as a "natural experiment" in a more "natural setting" is emblematic for this process. The Clinic of the West exports its modes of dissecting, displaying, diagnosing and exhibiting to non-Western cultures.

As I have elaborated in the introduction, Caster Semenya's presence in the media is not so different from the spectacle that Sarah Baartman was subjected to in the 19th century; the 'freak show' continues. Semenya has been othered by the representation of her body as not properly sexed and not properly gendered according to the standards of white, female, bourgeois and civilized standards of Western femininity. Additionally, she has been othered through silencing. She has been denied a subject status from which she can claim authority over the description of her body and her identity. I argued in my dissertation that silencing of the other is a dominant feature in the creation of the other. In the case study on clinical ethnography by Herdt and Stoller I analyzed how Sakulambei is silenced. Herdt's and Stoller's paternalistic attitude features in their behavior towards Sakulambei and in their claim to be able to extract the secret of sex of Sakulambei's body. Here the medical gaze of the Clinic becomes a Western gaze which produces not just the body of the other (the intersexualized) but also produces the culture of the other, which is less sophisticated or civilized than Western culture. Subsequently, it can, therefore, host the hermaphrodite as a part of culture.

By analyzing Stoller's work in the Clinic and Herdt's adaptation of it in the Colony I presented the ways in which the construction of a "third" in intersexualization functions and serves the purpose of consolidating a hermaphroditic gender identity on the grounds of a hermaphroditic body. This consolidates the assumption that a male body causes a male gender identity and a female body causes female identity, which is stable throughout life. In this framework, the third gender becomes the cultural yet necessary expression of a third sex. By using the concept of the polymorphous perverse to explain a postulated three-sex system in Sambian culture, this specific system is exoticized and constructed as less developed, less civilized; the two-sex one becomes newly institutionalized as hegemonic in the space of the Colony. Even though I charted the polymorphous perverse as a promising concept in Freud's work which could have been taken up by Money and Stoller instead of the concept of innate biology, I do see a problem in using it for the description of the organization of another culture as a whole. By championing the polymorphous perverse as a possibility to think embodiment, desire and subjectivity differently in the West I intended to indicate that the notion of bifurcated identification process in an oedipal setting reaffirms civilization as necessarily based on two heterorelational monosexualities. Yet, using the polymorphous perverse to describe the permissiveness to the multiplicity of embodiment of other cultures, as I demonstrated in the case in Herdt's work, is to imply the framework of civilization. This subsequently positions the other culture as childlike and less developed in this psychoanalytical framework. I do not doubt Herdt's intention to defy the rigid sex/gender system of the West by referring to the Sambia who are able to accommodate more than two sexes/genders. Yet, the use of this metaphor of the polymorphous perverse is not sufficiently explained; civilization as the celebration of binary sexual difference is not tackled but rather reiterated and reinstalled. Moreover, to use the sexuality of the other always implies otherness on the basis of sexuality. Normalizing processes that occur in the West are based on references to the other. The distinction between male/masculine and female/feminine as a product of these normalizing processes is in its production not just based on the referent of the "sex(ualized)/gendered other" but also based on the referent of "the racialized/ethnicized other".

In the section on the Colony I interrogated the underlying evolutionary discourses which ground the othering process fundamental to cross-cultural intersexualization. I hereby focused on the discourses of anthropology, psychoanalysis and sexology as having emerged in a colonial and imperialist time which was dominated by (social) Darwinist evolutionary thinking. The orders of nature from this time are clearly present in the revived notion of the fifth other, the polymorphous perverse culture in cross-cultural intersexualization. These orders are reinstalled when Herdt argues that the Sambia, who are thereby represented as immature and childlike as a culture, can accommodate a third gender that is based on a third sex. The civilized and sophisticated West produces the other and their "other sexuality", namely that of arrested development of the intersexualized body, in the arrested development of the other culture. In my analysis in the Colony I intended to show that the phallographic and ethnicized/racialized organization

of bodies along the hierarchical coordinates of ‘white’ maleness/masculinity and femaleness/femininity and their locatedness in geo-political arrangements of bodies and identities has not ceased to be employed in the interpretation and representation of the “other body” in the “other culture”. “Intersexuality” in the other is represented as a mythical “phenomenon”. The story of the other is silenced by the imposition of the story of the West and its orders of nature.

However, in the excursus I very briefly looked into the reclaiming of stories by the Two-spirit movements of Native Americans. By tracing the application of the anthropological term *berdache* I demonstrated that multiplicities of cultural organizations in Native American cultures were subsumed under one umbrella-term. Anthropologists then used to describe what they cannot grasp but nevertheless wanted to categorize and make intelligible in the framework of a Western bio-medical explanation system of sexual dimorphism and the organization of binary genders. The Two-Spirit movements are those which re-collect their stories and their histories and re-assemble them in a post-colonial space. I argued that these movements emphasize and combine differences in a third space in which various voices reclaim and adapt various stories. They compose a future that incorporates their histories, yet produce something new. Their assembling and reclaiming of different narratives seems to me a promising move which could also help open up the dichotomous Western sex-gender-sexuality-system and make it obsolete. I want to end this dissertation on intersexualization with a plea against epistemic and material-discursive violence and *for* the multiplicity of narratives, identities and embodiments.

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Nederlandse Samenvatting (Summary in Dutch)

Dit proefschrift belicht specifieke historische momenten waarop antropologische, biomedische en psychologische visies hermafroditisme ofwel 'interseksualiteit' hebben geproduceerd. Bovendien onderzoekt dit proefschrift de onderliggende stijlfiguren die samenkomen in het macht/kennis complex dat chirurgische interventie in interseksualisatie als enige oplossing naar voren brengt. Aan de ene kant laat mijn werk zien hoe dit proces onlosmakelijk verbonden is met binaire categorieën zoals man/vrouw, hetero- en homoseksualiteit, normaliteit/abnormaliteit, geciviliseerd/ongeciviliseerd, hetzelfde/anders. Aan de andere kant laat ik zien hoe deze categorieën opnieuw gedefinieerd worden in de ontwikkeling en toepassing van de categorie 'interseksualiteit' in niet-westerse culturen. Dit proefschrift legt de nadruk op het onderzoeken van literatuur uit de Verenigde Staten, in het bijzonder het werk van John Money, Robert Stoller, Gilbert Herdt, Julian Davidson and Julianne Imperato-McGinley. De bijdragen van deze auteurs aan het proces van theorievorming over interseksualiteit wordt geplaatst in de context van hun achtergronden, disciplinaire scholing, samenwerking, onenigheden en referentiekaders. Ik beargumenteer dat interseksualiteit niet een op zichzelf staand fenomeen is, maar een vorm van kennisproductie. Ook het behandelingsparadigma dat uit de creatie van 'interseksualiteit' als een medische categorie naar voren kwam, dient op deze wijze te worden geïnterpreteerd.

In het eerste deel, met als titel *De Kliniek*, richt ik mij op John Money's en Robert Stoller's toepassing van de Freudiaanse psychoanalyse en specifiek op hun pogingen om categorieën als gender, genderrol, genderidentiteit en sekse te definiëren, alsook het behandelingsparadigma wat hieruit voortkwam. Daarnaast laat ik zien dat het genderconcept dat in het leven wordt geroepen tijdens het proces van interseksualisatie sekse en gender tot iets essentieels maakt. Vervolgens beargumenteer ik hoe het corpus dat ik onderzoek stevig verankerd is in zowel een patriarchaal als heteronormatief kader. Dit kader belicht de bredere sociale en culturele organisatie van sekse en gender. Door de creatie van subcategorieën als genderrol en genderidentiteit in kaart te brengen, suggereer ik dat Money's en Stoller's onderzoek het heterorelationele sekse-gender-seksualiteits systeem essentialiseert op zowel biologisch als psychologisch niveau. Ik ben van mening laatzien dat het idee van een 'natuurlijke' gegerende organisatie van mensen alleen in stand kan worden gehouden door de interseksualisatie van lichamen en identiteiten door middel van chirurgische interventies. Verder onderzoek ik het werk van denkers in feministische seksestudies, in het bijzonder Anne Fausto-Sterling's model van de *Vijf Seksen*, met betrekking tot interseksualisatie. Kritische feministische beschouwingen aangaande het los van essentialistische denkbeelden over lichamen laten en seksuele differentie passeren ook de revue.

In het tweede deel, met als titel *De Kolonie*, onderzoek ik het cross-culturele proces van interseksualisatie in de antropologie. De onderzoekers van belang voor mijn onderzoek zijn Gilbert Herdt, Robert Stoller, Julian Davidson en Julianne Imperato-McGinley. Ik onderzoek de disciplines waarin zij zich bewegen en plaats hen in hun geopolitieke context. Ik bekijk ook hun claim van het bestaan van een cultuuroverstijgende en universele 'waarheid' van 'interseksualiteit', door te laten zien dat deze aanname voortkomt uit een sterke drang naar medicalisatie. Daarmee geef ik ook aan dat dit de binaire organisatie van de seksen/genders door de constructie van de 'derde ander' genormaliseerd heeft.

Ik beargumenteer dat juist in het *onderwerp* van interseksualisatie stijlfiguren van beschaving, ontwikkeling en naïviteit op een neokolonialistische manier gecombineerd worden met de categorieën van het westerse sekse-gender-seksualiteits systeem. Westerse kennissystemen kruipen in de interpretaties van het 'veld' en de Westerse referent (her)installeert zich als het middelpunt. Van belang is de positie van de Westerse onderzoeker die naar andere culturen reist en daar 'kijkt', interpreteert, diagnosticeert en categoriseert. De onderliggende kenmerken van deze blik liggen in het pathologisch maken van niet alleen de culturele ander, maar ook de seksualiteit van de ander. Deze proces is al veel onderzocht in de analogieën tussen seksualisatie en racialisering/etnisering, maar nog niet toegepast op het proces van interseksualisatie, zoals ik in dit proefschrift doe. Ik benadruk ook de stijlfiguur van de Derde ander en de toepassing hiervan in uiteenlopende contexten. Dit voorbeeld wordt niet alleen gebruikt om nadruk te leggen op de neokolonialiserende kenmerken van het antropologisch categoriseren van sekse-gender-seksualiteits systemen, maar ook om de mogelijkheden van verzet te belichten. Verder lever ik inzichten in de historische organisatie van Westerse kennisverwerving, door te kijken naar de herkomst van disciplines als seksuologie en psychoanalyse. Deze organisatie laat antropologisch onderzoek zien dat bijdraagt aan cultuuroverstijgende interseksualisatie.

Ik concludeer dat het proces van cultuuroverstijgende interseksualisatie gereflecteerd wordt in het onderscheid tussen sekse en gender en de medicaliserende westerse blik op de racialiserde/etniserde/seksualiserde ander, die de ander creëert en normaliseert volgens het Westerse heterorelationele systeem. Als laatste overweeg ik of het mogelijk is geschiedenis, kennisverwerving en de toekomst van interseksualisatie te herzien.

Biography

Christina Annalena Eckert has an MA in Gender History from the University of Essex, UK and an M.A. in Gender Studies and Modern German Literature from Humboldt University of Berlin, Germany. From 2005-2007, her PhD project was located at the Interdisciplinary Center for Gender Studies at the University of Leeds. Her PhD project was completed at the Graduate Gender Program of the Gender Studies Research Group at Utrecht University, NL in 2010. Christina Annalena Eckert taught at the Sociology Department of the University of Leeds and at the NOISE summer school at Utrecht, she has given several lectures and talks also in non-academic spaces. Her publications include articles and chapters in journals and edited collections. She co-edited the online journal *Liminalis. Journal for gender emancipation and resistance* and the edited collection *Gender Bound and Unbound* (CSP).

Keywords

Intersexuality, hermaphroditism, sex-gender difference, gender-concept, anthropology, queer theory, feminist theory, the third sex/gender, bisexuality, Michel Foucault, John Money, Robert Stoller, Gilbert Herdt, post-colonial theory, psychoanalysis, Sigmund Freud, heteronormativity, Anne Fausto-Sterling, post-colonial theory.