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The Discursive Construction of Sex

REMAKING AND RECLAIMING THE GENDERED BODY IN TALK
ABOUT GENITALS AMONG TRANS MEN

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Introduction

The idea that sex and gender are different is one of the foundational contributions of feminist scholarship (Delphy 1993). It is this distinction—between the biological and the social—that has allowed scholars who place gender at the center of their work to demonstrate that femininity and masculinity are historically and culturally bound constructs rather than natural and universal truths. No matter how self-evident the physiological distinctions between women and men may seem, research on gender as a social construct in a variety of settings and time periods has demonstrated that different kinds of social behaviors are expected of women and men. Indeed, without the recognition that the sexual properties of the body (spoken of as *sex*) are distinct from the social norms for individuals who display these characteristics (termed *gender*), it is hard to imagine an alternative trajectory that could have brought contemporary transgender identity into existence. However, poststructuralist feminists—most famously Judith Butler (1993), but also Christine Delphy (1993) and Linda Nicholson (1994)—have argued for the last two decades that sex is no more natural than gender, and that both are in fact constructed through the lens of a particular place and time.

Although the perspective that sex is no more natural than gender has received significant attention from poststructuralist theorists, it has yet to be fully integrated into mainstream academic understandings of gender and sex, in which the so-called coat-rack model (Nicholson 1994) continues to thrive. This model provides an easy metaphor for understanding gender and sex as different and oppositional concepts: as a representation of the body, the coat rack is framed as a more or less immutable object that does not change in shape or appearance; the only thing that varies is the coat laid on top of the rack, which stands in for any given culture's particular expectations for

women and men (this image is extended by Delphy 1993 as a distinction between a container and the substance it contains). As useful as the image of the coat rack may be, it is also deeply problematic. Specifically, the emphasis on the differences between gender and sex has often resulted in a strict, and ultimately misguided, binary between the supposedly natural state of being female or male on the one hand and the arbitrary cultural burdens placed on members of these categories on the other. The result is the naturalization of biological and categorical difference between “female” and “male” bodies, even as affective, behavioral, and interpersonal aspects of gender are denaturalized. When sex is treated as the inevitable truth of nature, the body is protected from the forces of social constructivism that create gender. As long as sex and gender are conceptualized as opposites, with sex playing the part of the body’s precultural state, biological essentialism retains the ability to enforce and naturalize a limiting gender binary. It is through the recognition that sex is not opposed to gender, but rather a part of it, that we can launch a thorough investigation of the gender binary itself.

Butler, who is most often credited with exposing the fact that sex has been “gender all along,” argues that sex is not only socially but also discursively constructed. In this chapter I take to heart the proposal that it is within discourse—in the linguistic as well as the poststructuralist sense of this term—that we can discover how the body is inscribed with social meaning, rather than locating this meaning in the body itself. Specifically, I focus on the power of language to redefine the body in the face of compulsory gender and sexual normativity. I accomplish this goal through an analysis of talk about the body in an online community for individuals who are undergoing, are considering, or have completed a transition from female to male, based on data I collected as part of several years of ongoing multi-sited participant-observation in several overlapping transgender communities. For the purposes of this chapter, female-to-male trans people, or trans men, are individuals who were assigned to a female gender role at birth and raised accordingly, but who at some point came to self-identify as men.¹ The lexical items these speakers employ for talking about their genitals, especially when referring to purportedly “female” body parts, demonstrate concretely not only that the dominant division of bodies into categories of “female” and “male” is a cultural phenomenon, but also that language provides the tools to refashion this binary in ways that better suit a community’s visions of how gender should be conceptualized, whatever those visions may be.

This chapter builds on a small body of literature that considers the lexicon of embodiment, including work by Deborah Cameron (1992), Victoria Braun and Celia Kitzinger (2001a, 2001b), and Heiko Motschenbacher (2009). In close alignment with this chapter, Cameron (1992) and Braun and Kitzinger (2001a, 2001b) uncover misogynistic and heterosexist worldviews beneath the surface of male and female genital terminology, demonstrating

that the words we use to talk about sex have a great deal to do with how we think about gender. Braun and Kitzinger's (2001b) analysis of dictionary definitions for *vagina*, *clitoris*, and *penis* reveals that penises are defined as active, functional organs that form the unmarked basis for comparison of other genital parts, such as the clitoris (e.g., in their dataset, the definition of *clitoris* explained this body part as analogous to the penis, but the definition of *penis* made no reference to the clitoris). Vaginas and clitorises are described mainly with respect to location rather than function, and vaginas in particular are conceptualized as an empty space meant to be the passive recipient of the penis during heterosexual coitus.

This linguistically oriented literature suggests that lexical analysis is a useful tool for uncovering one of the covert mechanisms for the making of gender and sexual normativity. Certainly, it is clear that language reveals and reinforces repressive limitations enacted through the gendering of embodiment. Even as language sometimes "gives us intellectual cataracts," as Anne Fausto-Sterling puts it (2000, 236), it also promises the potential of change. Braun and Kitzinger (2001b) briefly suggest some feminist alternatives for each of the problematic themes they identify (namely the binary of active masculinity vs. passive femininity, the notion of presence vs. absence, and the imposition of heteronormativity). Instead of conceptualizing the penis as active in its penetration of a passive vagina, for instance, a vagina can be spoken of as engulfing a penis, casting this orifice as active in the same way the mouth is. Motschenbacher (2009) likewise suggests that conventional associations between gender and the body can be broken, particularly when it comes to the embodiment of trans people, which might lead a speaker to refer to a woman's penis or a man's vagina (Motschenbacher 2009, 4). In this chapter, I expand on these brief references to the possibility of reconstructing sex by detailing an alternative system for gendering the body as found in the discursive practices of trans men in a popular online community. Contrary to claims that the body cannot be transcended or "reimagined by a discursive mantra," as Vernon Rosario (2004) puts it, I argue that trans men's talk about genitalia shows how discourse can and does outstrip some of the most basic, commonsense 'facts' about the gendered body. I make this claim not to suggest that we should minimize the importance of the body or collapse the notions of gender and sex, but rather to argue that we must recognize the shared origins of gender and sex in discursive practice.

Biological Sex and the Sex/Gender Binary

CRITIQUING THE SEX/GENDER BINARY

The separation of gender from sex is a rather recent intellectual development, and one that is clearly related to the goals of activists and authors aiming

to separate the socially constructed nature of feminine and masculine social practices from physical embodiment. However, as Delphy (1993) describes in her history of gender and sex, the concept also carries with it a decidedly academic history that includes scholars such as Margaret Mead (1935), John Money (Money, Hampson, and Hampson 1957), and Ann Oakley (1972). Although feminists popularized this division between sex and gender, an early incarnation of this binary appears in the work of sexologists Money and his coauthors John Hampson and Jean Hampson (1955a, 1955b, 1956, 1957). These researchers were interested in physiological conditions that result in sexual anatomy and/or chromosomal makeup that defies easy categorization as female or male and whether socialization could produce men and women who fit within the gender binary even where nature failed to do the same. The birth of the sex/gender binary, then, is closely linked to gender trouble, in Butler's (1990) sense. In fact, there is nothing inherently subversive or liberatory about the distinction between gender and sex, as it can lead to nothing more than displacing the site of the gender binary from biology to culture or vice versa. As Delphy (1993, 3) points out, in the coat-rack model sex is seen as the starting point for, and source of, gender: "sex comes first, chronologically and hence logically", leading to "a theory that sex causes, or explains, gender" (1993, 4).

As with gender, some of the best evidence that sex is socially constructed comes from the diversity that can be found across cultures in how the relationship between gender and the body is understood. Anthropological research by Gilbert Herdt (1990, 1993), for instance, illustrates the ways that sexually ambiguous bodies may be viewed as male in some cultural contexts, female in others, and as belonging to a third gender category in yet others. Specifically, he focuses on an intersex condition that causes individuals with XY ("male" chromosomes) to develop ambiguous or "female"-appearing genitals at birth, which then become masculinized during puberty. Herdt notes that even as this shift is understood as a transformation from female to male in some cultural contexts, he describes the special third gender category reserved for people with this form of embodiment among the Sambia of Papua New Guinea.

As Butler argues, any attempt to define sex as a natural, biological state is inevitably a cultural act, if only because one must choose precisely where to delineate the natural from the cultural (1993, 10–12). There is no obvious point at which these categories can be divided, as physiology and culture intertwine and perpetuate one another as part of the construction of gender difference. For instance, the perceived gender disparity when it comes to the average amount of body hair or muscle mass a woman or man has is no doubt influenced by various physiological factors, but also by social choices about things like athletic activities and hair removal practices. Thus the malleability of sex is also of great significance even for those with more normative sexual

embodiment, considering the way people modify the gendered elements of their bodies constantly through dress, hair style, cosmetics, externally applied scents, surgery, diet, fitness activities, piercing and tattooing, and so on.

A final and surprising example of the dramatically different ways biological sex can be conceptualized comes from the historical research of Thomas Laqueur (1992). Laqueur's work shows that the process of constructing sex occurs as much for individuals who are unambiguously female or male as it does for intersex or trans people. Specifically, he documents a shift in Western discourses during the 18th and 19th centuries away from the understanding of women's and men's bodies as fundamentally alike and the toward the female/male binary that has since taken its place. In the older, single-sex perspective on the body that Laqueur identifies as dominant since Greek antiquity, women were seen as embodying an undeveloped version of the normative male body. This is not to say that no gender binary existed; indeed, the single-sex model coexisted with intense dichotomies between women and men that ascribed different personal characteristics and basic rights to each gender. But the gender binary was not thought to derive from differences in biological essence, as it is today. Instead, embodied differences were seen as merely one more piece of evidence for the more general "cosmic" difference between women and men (1992, 115). According to Laqueur, there existed no "technical term in Latin or Greek, or in the European vernaculars until around 1700, for vagina as the tube or sheath into which its opposite, the penis, fits and through which the infant is born" (1992, 5). It was not until the beginnings of a new science of gender, which now finds sexual difference in nearly every part of the body, that words like *vagina*, *ovary*, and *uterus* became part of the medical lexicon. Considering this history, it is clear that even the basic idea that the penis and vagina are different (let alone opposite) body parts, rather than external and internal versions of the same organ, is the product of a particular culture at a particular point in time. So is the belief that the body comes primarily or exclusively in two types – female and male.

None of these arguments about the social construction of sex should be understood as a claim that bodies don't matter (Butler 1990, 1993, 2004). The point is that bodies are social objects that receive their meaning in the same way as other cultural signifiers: not from their own inherent properties, but from an always emerging complex web of social meanings and contexts. The "femaleness" or "maleness" of a body part is not natural but imbued with meaning by the discourse of social actors. In other words, sex does not precede gender; in a very real sense, gender precedes sex.

TRANS BODIES AND BIOLOGICAL SEX

Up to this point, I have been using the label *trans* without specifying its meaning, but it is now necessary to clarify what kinds of trans bodies I am

talking about. In much of the academic research on trans experience, there is a well-established practice of drawing a clear line between the categories of *transsexual* and *transgender*, based in part on the fact that the word *transgender* originally came about as an alternative to the problematic image of transsexuality critiqued by both non-trans feminists and some trans people themselves (e.g., (Boswell [1991]1998); (Feinberg [1992]2006); (Shapiro 1992); (Stone 1992); (Stryker [1994]2006); see (Stryker 2008) for more on this history). At least since Harry Benjamin's (1966) book, *The Transsexual Phenomenon*, transsexuality has been associated with highly normative enactments of gender (cf. Edelman in this volume). As part of a history too varied to recount here (see Meyerowitz 2002, Stryker 2008), *transgender* was taken up by trans people and feminist theorists in the 1990s as a symbol of gender subversion. Originating several decades earlier, the term first arose in reference to those who identified with and lived their lives as members of the "opposite" gender from the one assigned to them at birth without making use of the somatic tools of transsexuality. In contemporary usage, however, the line between transsexuality and transgenderism is blurred (see Valentine 2007 for the sociopolitical context of this merger), which is reflected in my choice of the shortened form *trans*.

Particularly among those transitioning from female to male, for many years now a sizeable contingent of individuals have been forgoing genital surgery but nevertheless see themselves as men in every way, despite their lack of conventionally masculine genitals (Cromwell 1999). Many of these individuals identify simply as "men" rather than "transmen" or some other marked or non-normative gender category, and they describe themselves as transsexuals despite not following the supposedly unyielding path said to characterize transsexuality. In addition to the possibility of forgoing surgical modification of the genitals, several surgical options make use of trans men's own genital parts in ways that blur the distinction between "female" and "male" genitals, and between "natural" and "constructed" bodies.

Trans bodies have often been held up as exemplars of the construction and potential reconstruction of sex. Often, the processes under consideration are literal, embodied reconstructions brought about by medical technology. These somatic practices are understandably of interest, particularly given their central role in transsexuality's popular and academic image, as well as in trans people's own lived experience. What is even more remarkable, though, is the social resignification of these bodies that also takes place. Jay Prosser (1998) examines the intersection of these two forms of reconstruction—corporeal and cultural—in his analysis of the "body narratives" found in transsexual autobiographies. Prosser's psychoanalytic approach allows him to explore how transsexuals gain a sense of bodily coherence through surgery, rather than feeling the loss that many non-trans people imagine when they consider such significant sexual modification (cf. Sullivan 2006; Loeb

2008). In the case of a phalloplasty—one option for genital surgery available to trans men—Prosser argues that skin harvested from a trans man’s forearm can come to be experienced and understood as part of his surgically constructed penis only because he already possesses a psychic penis that is just waiting to be realized in the flesh. The importance of achieving what Prosser calls “gendered realness” and a sense of “home” in the body, both achieved through corporeal change, is so critical to many trans people that Prosser is inclined to criticize the narrow concentration on discourse as the source of both sex and gender offered by theorists like Butler. Prosser’s point, which reflects and forms part of the trend in trans studies toward focusing on embodiment, is that the body is much more than purely discourse. This is worth remembering, particularly given that the body is a site of oppression for so many trans individuals. But Prosser’s emphasis on literal transformation through genital surgery is limiting, and he goes too far when he claims that “a particular experience of the body [as male] can’t simply transcend (or transubstantiate) the literal” (1998, 59) (i.e., that discourse cannot override the reality of embodiment).

Although it is true that discursive practices cannot “simply” transcend speakers’ literal bodies—indeed, it involves rather complex work—I present below an analysis of trans men’s talk about their genitals that demonstrates that some degree of discursive transcendence is in fact taking place when it comes to the gendered meanings that trans men attribute to their own and one another’s bodies. My focus is on the way language can be employed even in the absence of radical bodily transformation. Trans men’s transcendence of their assigned sex is enabled, not inhibited, by the realities of the flesh, as they skillfully draw on scientific discourses about the relationship between female and male genitals, as well as the changes that testosterone causes in their bodies, to create a different perspective on biological maleness. I show how Butler’s conceptualization of sex as stemming from discourse is exemplified by the way trans men refuse hegemonic readings of their bodies as female and instead insist on defining themselves as physically, as well as socially, male. Their perspective carries some commonalities with the single-sex model described by Laqueur, but at the same time it departs radically from this view by recreating the body as a site for self-definition and self-determination.

Trans Men’s Bodies

As I have already suggested, corporeality is a key part of trans experience. Rodrigo Borba and Ana Cristina Ostermann (2009) argue that sociocultural linguists who work with trans communities should consider the relationship between embodiment and linguistic practice because of the crucial role of the body in the formation of gender-variant identities. After all, trans people and

other gender non-normative groups are often defined by a purported mismatch of biological sex and self-identified gender.

Yet the idea that trans people are individuals whose sex is at odds with their gender assumes an essentialist model of sex. If trans people are always male-bodied women and female-bodied men, then changing sex is essentially impossible, and even bodies that have undergone significant change remain fundamentally female or male on the basis of sex assignment at birth, presumed genetics, or some other factor. Even when trans people's self-identified genders are portrayed as legitimate, it often seems that sex is an immutable truth, impervious to self-identification. The habit of referring to non-trans people as *biological women/men* suggests that trans women cannot be truly biologically female, nor can trans men be truly biologically male. It is important to note that this practice can be found among trans speakers themselves. In Jason Cromwell's (1999) ethnography of a group of trans men, for instance, the author, a trans anthropologist, consistently describes his research participants as "female-bodied men." Bobby Noble similarly writes in a semi-autobiographical piece that because many trans men opt not to pursue a phalloplasty, which constructs an average adult-sized penis using both genital and nongenital tissue, they "cannot leave the *trans* behind and become *men*" (2006, 98; emphasis in original). Clearly, Noble's assumption is that a particular type of penis is a necessary part of being male, although it seems that at least some trans men may gain access to this status if they opt for one particular (and particularly expensive) procedure. Rather than seeing the legitimization of genital surgery over other medical interventions as a demand placed on trans people by the broader social processes that regulate bodily normativity, authors such as Marjorie Garber have claimed that "transsexuals radically and dramatically *essentialize* their genitalia: 'The absolute insignia of maleness' [i.e. the penis] *is* for them the index of male identity" (1997, 98; emphasis in original).

While this claim may be true for some trans people, trans men have in dramatically increasing numbers begun to contest the treatment of their bodies as female and have harnessed the linguistic practices already circulating within their communities in order to discursively reconstruct their bodies as entirely and legitimately male.² Thus it is inappropriate to draw a sharp line between the presumed normative embodiment of transsexuals and the supposedly revolutionary bodies of transgender people, if only because many trans men who choose not to employ surgery to modify their genitals identify strongly as male and describe themselves as transsexual. Many authors discussing female-to-male genital surgery only discuss the phalloplasty option (e.g., Garber 1997; Noble 2006; Prosser 1998) despite the fact that a relatively small number of trans men opt for this procedure (see, e.g., Cromwell 1999; Rubin 2003). For many, a phalloplasty is unaffordable and may not provide the desired results;³ another surgical technique, or no surgery at all,

may be preferable. The procedure that trans men most frequently use to alter their genitals, which is both more affordable and more common than phalloplasty, is metaoidioplasty (also spelled *metoidioplasty*). Metas, as they are also called, are based around a procedure known as *clitoral release*, in which ligaments are cut so that the patient's existing genitals can stand more freely away from the body and thus be more phallic in appearance and function. This outcome is facilitated by the fact that testosterone therapy, which is very commonly used by trans men and is often a prerequisite for metaoidioplasty, causes what is medically known as clitoromegaly, or enlargement of the clitoris. Metaoidioplasty results are generally smaller than phalloplasties, and penetration may or may not be possible, but for many individuals this option allows for greater retention (or even increase) of erotic sensation. For trans men who cannot or choose not to make use of either of these surgeries, the genital growth provided by hormonal treatment is enough to help some feel more comfortable with their bodies.

The various options that trans men have available to create changes in their embodiment create a continuum of trans male genitals, including those that have been shaped by phalloplasty, metaoidioplasty, and/or testosterone, as well as others that appear normatively female. There is thus no clear line separating trans men who have penises from those who do not. Meanwhile, the various realizations of trans men's genitals have little if any correlation with how these individuals self-identify or how they are perceived in their everyday lives. The use of testosterone therapy, which is generally employed with the goal of creating a hormonal balance considered typical for males, is the most viable and desirable medical intervention for most trans men. It is also one of the most profound, because testosterone therapy is often highly effective in producing many of the physical cues associated with masculinity, among them more body and facial hair, enlargement of the larynx (which results in a drop in vocal pitch), and an increase in muscle mass coupled with the redistribution of fat from areas like the hips and thighs to the abdomen. Many trans men also have surgery to remove breast tissue and reconstruct the chest to have a masculine appearance; these procedures are much more common than genital surgery. What this means with regard to the semiotics of gender is that many trans men are socially recognized as men, even if they have genitalia that most people would label *female*.

It is also important to recognize that no truly clear line between penises and clitorises exists to begin with. As biologists have known for quite some time, these two organs originate from the same prenatal structure and share many morphological features (e.g., the presence of a glans and erectile tissue), and many people and organs cannot be categorized into clear biologically based categories. Doctors who "treat" intersex babies and children police the very real overlap between these body parts by operating on clitorises that are "too big" or penises that are "too small" (Fausto-Sterling 2000, 59–60). In

a way that again recalls Laqueur's account of the rise of a two-sex model of gender and the body, the socially driven erasure of ambiguous bodies props up a binary system that treats female and male genitals as fundamentally different—even as polar opposites—by nature.

HOW TRANS MEN DISRUPT THE LINK BETWEEN GENDER AND THE BODY

One of the most salient practices that trans men engage in when talking about their own and one another's bodies involves the coining of new words, such as *bonus hole* or *front hole* to refer to the vagina. However, the focus of the present analysis is on speakers' more subtle reworking of traditional genital terminology. This takes place by disrupting the semantic link that ordinarily exists between genitals and gender. Trans speakers question the reasoning that says particular physiological characteristics are inherently gendered, contesting the assumption that having a penis necessarily makes a body male while having a vagina (or lacking a penis) makes a body female. In strategically aligning themselves with either traditionally masculine or traditionally feminine genital terminology—an alignment that for many speakers shifts depending on the circumstances of talk—trans men are able to accomplish different kinds of interactional work that fulfill the needs of their particular communities of practice.

The data analyzed below are drawn from several years of participant observation in a number of different transgender communities in metropolitan areas in the western United States as well as English-medium online spaces. The data were collected during the fall of 2007 as part of ongoing participant-observation in TransMenOnline, a popular internet community geared toward trans men and others on the female-to-male identity spectrum, as well as their allies.⁴ Members of TransMenOnline use the online forum to discuss a broad range of trans issues, to share information, and to provide support and advice. The body is a recurring topic of discussion, and the negotiation of how trans men's physiologies should be talked about is commonplace. These discussions are of particular interest for sociocultural linguistic analysis because of the importance this group places on the use of appropriate and respectful language (according to its own norms), the unusually large amount of metalinguistic discourse, and the heated political nature of the disagreements that sometimes occur when notions of acceptable language differ among community members.

The most prominent trend in my data is the use of traditionally male body part terms in ways that are not sanctioned by their ordinary definitions. At times, the same individuals will also employ words generally seen as describing female body parts, without undermining their male-bodied status. The data presented here were collected from the forum in a one-month period in 2007; during this time period, 258 new threads were started, each

containing anywhere from zero to over a hundred separate replies from other users. All entries in the data set that contained reference to genitals were extracted and coded according to both word choice and referent. The final data set was selected based on referent rather than word. For example, the word *dick* is sometimes used to refer to part of a person's body, but other times it refers to a "packer"—a type of prosthetic flaccid penis that some trans men wear. Because my interest is in how trans men talk about their own and one another's bodies, tokens that did not refer to genitalia were excluded. The three referents I chose, in traditional terminology, are "vagina," "penis," and "clitoris," although the distinction between the latter two organs is quite blurred in practice. All told, 128 lexical tokens were analyzed, of which seventy-two referred to the penis and/or clitoris and fifty-six referred to the vagina or other parts of the vulva aside from the clitoris.

The most common tactic for talking about physiological sex in the TransMenOnline community is to use vernacular terminology ordinarily used to describe normative male genitals, such as *dick* or *cock*, in reference to trans men's external genitals (i.e., the "clitoris"). This language is generally not intended in a playful, fantastic, or metaphorical way; many trans men describe themselves matter-of-factly as having a "dick," even if they have not modified their genitals with surgery. To give a sense of the distribution of word choices in my data, Table 2.1 shows the frequency of the most commonly occurring lexical items for external genitals. *Dick* appears most frequently, and is often used in reference to trans men's bodies, but also in reference to nontrans men. Some tokens had nonspecific or generic referents, as when one commenter questioned an idea that is often tossed around among trans men when discussing what size of packer is most appropriate for particular individuals: "i don't understand the idea that shorter men need to look like they have smaller dicks. there is no link between penis size and height." In this comment, the "dicks" being talked about belong to unspecified short men, who could potentially be trans or not. *Cock* follows a similar pattern, but it is slightly less common in this corpus.

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TABLE 2.1

Common terminology for external genitals on transmen online, by referent

Referent	Trans Male Genitals	Nontrans Male Genitals	Female Genitals	Unspecified/Generic	Total Tokens
<i>dick</i>	16	6	-	5	26
<i>cock</i>	9	2	-	1	12
<i>penis</i>	2	1	-	8	11
<i>clit(or)s</i>	-	-	2	4	6
<i>dic-clit</i>	3	-	-	-	3
euphemisms	8	-	-	-	8
misc. masculine	6	-	-	-	6

Penis, on the other hand, has a somewhat different range of reference. While there are two instances of this word referring to a trans man's body, in both cases they are specifically in reference to the post-surgical results of a phalloplasty. I suggest that this limited use of *penis* is part of a broader tendency among trans men to use vernacular—rather than medical—“male” body part language when talking about their (usually hormonally enlarged) phalluses. While many trans men invoke scientific discourses to legitimate their emphasis on the continuum between penises and clitorises, some may not be willing to dismiss scientific and medical authority altogether and might feel that claiming a “penis,” rather than a “dick,” is a riskier assertion, open to rebuttal from authoritative sources.

Clitoris, following another pattern, was used in these data in only two kinds of contexts: in reference to women's bodies or in reference to a generic body that may belong to either a trans man or a nontrans woman. The latter type of referent can be seen in a comment that describes a genital piercing known as a *triangle* using the nonspecific phrase *the clitoral shaft* (Example 1), rather than referring to any specific person's clitoris. (All examples appear as originally posted, including any typos, misspellings, and so forth.)

- (1) *Since triangles are positioned behind the clitoral shaft, any growth you've got from being on T (i.e., testosterone) may limit whether there's enough room for the piercing?*

The collocation of *clitoral* and *shaft* is a common phrase in piercing terminology, but the attribution of a “shaft” to the clitoris highlights the relationship between penises and clitorises, whether or not this was the intention of the speaker. Although the individual who wrote the comment in (1) is not trans himself, his word choice suggests an awareness of the sensitivity required during the deployment of gendered language in this space.

Another term that falls somewhere between conventionally feminine and masculine body part language is *dic-clit* (also spelled *diclit*, *dicklet*, and similarly). This term has a fairly long history among trans men. In the late 1990s, when I had my first exposure to trans communities, it was in wide circulation, particularly online. In recent years, however, it has fallen out of use, and today, trans men are far more likely to simply refer to their *dicks*, rather than blending the word with *clit*. In fact, the single individual in my data who used the word *dic-clit* in 2007 was only just reconnecting with trans communities after a long period of absence—which took place precisely during the time that this shift occurred. His use of *dic-clit* was quickly challenged by a commenter who found the blend inappropriately feminizing, writing, “there is no reason to use female terms to refer to trans men, pre-t or not.” The movement among trans speakers away from *dic-clit* and toward *dick* has occurred in lockstep with the growing tendency for trans men to describe themselves as male-bodied and with the diminishing acceptance of describing nontrans

men as *biological men*, a term that occurred only once in my data despite its previous relative prominence among trans people (*non-trans* or *cis*, the Latin antonym of *trans*, are generally preferred ways refer to those who are not trans).

Finally, some community members used creative, amusing, or unusual language, including *down there*, *this part of the body*, and *peepee* (all coded as euphemisms in Table 1.1), as well as *package*, *the little guy*, *dangle*, *schlong*, *weenie*, and *prick* (coded as miscellaneous masculine terms in Table 1.1). Although the range of terms is broad—for talking about external genitals in particular—it is clear that masculine or gender-neutral language is the norm in this group.

When trans men opt to describe their biology with “male” genital terminology, they construct themselves as male-bodied by decoupling physiological function from gender in the semantics of these words. For them, a *dick* is not, as the *American Heritage Dictionary* claims for *penis*, a male organ of urination and copulation, but is instead defined by its gendered meaning. In the semantic system employed by trans men in this community, *dick* refers to a man’s genitals, regardless of how the organ might look or work. This basic value is at the core of many trans people’s system for understanding biological sex: female and male bodies are not defined by their corporeal realizations but by the gendered subjectivities of those who animate them. A man’s body is simply the body of a man, no matter its shape or appearance.

The linguistic practices I have thus far described create what Bucholtz and Hall (2004) have identified as adequation, or “sufficient similarity,” between trans men’s bodies and those of nontrans men. This can be seen even more clearly when we examine the way nontrans men’s genitals are discussed, as Examples 2 and 3 illustrate.

- (2) *do you have much experience with factory direct dicks?*
- (3) *I can’t say that I have a lot of experience hold and feeling non-trans dicks.*

Rather than using unmarked language to refer to nontrans men and their bodies, such as simply *men* or *dicks*, members of TransMenOnline consistently use qualified phrases like *non-trans dicks* and the lighthearted *factory direct dicks*, making it clear that nontrans men’s penises are only one type of male genitals. By emphasizing the similarities between their own bodies and those of nontrans men, while demoting the significance of any differences that might exist, members of this community reframe any disparities between trans genitals and those of nontrans men as primarily a matter of size rather than type.

This way of referring to the body is a linguistic enactment of a more general philosophy found in many trans communities: that there are no

significant categorical differences between trans people and their nontrans counterparts that mark the former as somehow less “real” than the latter. Members of this community rarely make overt reference to the idea that sex is socially constructed (in contrast to gender, which they often describe as a construction), but the practice of using the same vocabulary to talk about both trans and nontrans men’s genitals breaks down the naturalization of sex in two ways: first, by suggesting that there may not be a clear line between female and male bodies, and second, by implying that in a sense it is social gender identity that determines biological sex, rather than vice versa. Thus, these speakers’ defiant reworking of genital terms accomplishes one of the primary projects of many trans communities: to place self-identification at the core of legitimate and authentic gender—and sex as well.

However, there are also instances in which traditionally female body part-terminology is used, sometimes by the same speakers who also talk about themselves as having “dicks” or “cocks.” How can trans men make use of lexical items like *vagina*, *cunt*, or *G-spot* (each of which occur in my data) without undermining their status as male-bodied, rather than female-bodied, men? As noted above, there are uniquely trans alternatives such as *front hole* in place of *vagina*, but even with these options available some speakers still opt for potentially feminizing word choices. Once again, the gendered meanings of genital words are decoupled from their physiological entailments. However, in these cases it is the gendered semantic element that is deemphasized, so that a “vagina” can be expected to have certain structural properties but may be found on men’s bodies as well as women’s. The clearest indication of this phenomenon is the practice of attaching masculinizing modifiers to “female” genital terms. In Example 4, the writer refers to his *boy cunt*, making it clear that although he considers himself to have a “cunt,” this fact does not undermine his masculinity: his cunt is a boy’s cunt.

- (4) *it had been over 4 weeks since i wanted to be extra safe and was being extra sensitive about my boy cunt.*

Although they do not appear in this particular data set, I have heard other trans men talk about having a *boy-pussy*, *man-cunt*, *boy-snatch*, or even the self-consciously comical *mangina* (a blend of *man* and *vagina*).

Taking a slightly different approach, another poster who was soliciting support for the dysphoria⁶ he was experiencing in relation to his body (Example 5) asked whether he was the only community member “filled with immense hatred over his vagina.”

- (5) *I’m not the only one that is filled with immense hatred over his vagina, am I?*

By using the third-person singular masculine possessive pronoun to modify *vagina* (i.e., *his vagina*) rather than formulating a sentence that used the

first- or second-person possessive pronouns (i.e., *my vagina* or *your vagina*), the writer makes it clear that he is talking about the problems faced by men, not women, who hate their vaginas.

Thus, the use of feminine terminology is clearly a part of the linguistic practices of this community; however, such uses are highly marked and seem to be constrained to particular types of contexts. Three contexts for “female” body part language that were particularly prominent in my data were: (1) in technical talk about the body, such as discussions of surgery, health problems, or body piercings, (2) as part of expressions of emotional discomfort, and (3) as part of reclaiming and sexualizing body parts from which many trans men distance themselves. In each of these contexts, trans men sometimes make use of institutionally prescribed language for describing their bodies, but they do not align with the assumption that this type of language refers only to female-bodied individuals.

“Female” body part language occurs rather frequently in technical, scientific, or medicalized discussions. The comments in Examples 6 through 8 contain the words *vagina(l)*, *vulva*, and *hood* (i.e., the clitoral hood), in each case contextualized within some kind of specialized technical language.

- (6) [When performing a phalloplasty,] *other surgeons leave the vagina (which is to say, the vaginal opening, not the vulva in its entirety), which is then located behind the scrotum.*
- (7) *i'm actually supposed to get a . . . blargh trans-vaginal ultrasound of my uterus and i've been putting it off like crazy.*
- (8) *i used to have a vertical hood ring but it looked strange after T took hold.*

In the case of Example 6, a community member is explaining one of the methods that surgeons use when performing phalloplasties. Because the function of this comment is in large part to provide information about the technique to those who lack it, the writer's choice to use the same language that a surgeon might use (*vagina*, *vulva*, as well as *scrotum*) may be a matter of facilitating comprehension. The same could be said of Example 7: trans men have ways of talking about vaginas without using that particular word, but *trans-front-hole ultrasound* is an unlikely choice based on the patterns in these data. In Example 8, another poster talks about a genital piercing he had prior to testosterone therapy, called a *vertical hood* by body modification practitioners because it passes vertically through the clitoral hood. However, beyond making these postings easier to understand, this practice also falls into the more general trend of yielding to scientific authority when it comes to more formal, rather than vernacular, lexical items. In some situations writers make it clear that they are uncomfortable with certain words even as they use them—as in Example 7, wherein the use of ellipses, followed by the exclamation *blargh*,

marks a stance of reluctance to use the word that follows (*a. . . blargh trans-vaginal ultrasound*).

Discomfort with the body itself also seems to serve as a motivator to use traditionally “female” terminology, even when trans-specific terms like *front/bonus hole* could have just as easily been chosen. In my data set, the word *vagina* was the most common term used to refer to this body part, but the thirty-three tokens of this word and its derivations (e.g., *vaginal*) were confined to only two separate threads out of 258, with twenty-three tokens found in a single discussion thread. This thread began with the question found in Example 5 above: *I’m not the only one that is filled with immense hatred over his vagina, am I?* A similar usage, from the same thread, is found in Example 9:

(9) *I feel utter revulsion towards my vagina.*

Some trans men experience intense discomfort with their genitals, at least in part due to the compulsory gendering of body parts like the vagina as necessarily female. If one is focused on expressing this dysphoria, “female” body part language may function as a kind of icon for unhappiness about the “female” aspects of one’s body. These community members are not upset about having a “front hole,” that is, the structure itself; what they are distressed about is having a “vagina” and its concomitant gendered implications, even though these terms appear to point to the same referent. Thus, the choice between various gendered terms of reference for genitals can accomplish different kinds of interactional work within the TransMenOnline community. When speakers are expressing hatred toward their own bodies, what they are accomplishing socially is quite different from the more trans-affirmative functions of “male” terminology, as well as from the use of “female” terminology in technical talk about the body. Instead of focusing on sharing information, these discussions elicit emotional support and the sharing of similar experiences, building social ties that can be crucial lifelines for those without connections to trans communities in their local areas.

The final context that frequently evoked the use of “female” body part language in the data set was talk about sex. To be sure, “male” language is the most common choice in these conversations, but sexual discourse is also one of the few places in which vernacular “female” terms like *cunt* appear. The best example of this trend is in a thread started by a poster who wanted advice on cramps he experienced after vaginal penetration following a medical procedure for examining the cervix.

(10) *so last night i had i had my cunt penetrated for the first time since my colposcopy.*

This comment, which was written by the same poster who made use of the term *boy cunt* (Example 4), involves a discussion of a medical procedure, but the word *cunt* appears in an account of a sex act: the speaker “had [his]

cunt penetrated.” For those who use them, words like *cunt* or *pussy* appear primarily when discussing relatively positive sexual experiences—members do not talk about feeling uncomfortable with having a “cunt,” but about enjoying this body part. My collaborative work with Elijah Edelman (to appear) on trans men’s negotiation of queer male virtual cruising spaces indicates that these trans men in these settings will commonly describe their bodies using the same terminology. Certain sex acts themselves carry stigma among some trans men; for instance, some see the experience of being penetrated vaginally as emasculating. However, it seems that as time progresses more trans men (and nontrans men as well) are open to the idea that enjoying penetration does not undermine one’s status either as a “real man” or as a legitimate transsexual (despite the fact that diagnostic criteria traditionally emphasized that genuine transsexuals despise their unaltered bodies and refuse sexual contact (Benjamin 1966).

Resignifying sexualized language for body parts that transsexuals are supposed to hate is a reflection of the way some trans people have reclaimed these parts of their bodies as a source of pleasure, even if they are simultaneously a source of emotional pain. Importantly, the fact that the same writer produced both *cunt* and *boy cunt* in the same post demonstrates that using this type of language need not undermine trans men’s claims to being male-bodied. A man may have a “cunt,” from this perspective, but that does not make him any less male. Rather, it indicates that members of this community allow for a large range of body types that can be categorized as male.

Many trans men navigate choices between “male” and “female” genital terminology, including both vernacular and more medical options, without allowing any of these choices to undermine their identities as male-bodied men. The lexical items used by the members of the online forum for trans men in reference to trans genitals also facilitate the social work in which they are engaged—whether sharing medical information, providing or asking for support during times of distress and sadness, or reconceptualizing trans men’s bodies as sites of sexual pleasure. The most fundamental project that members of this community are engaged in is asserting the unmitigated legitimacy of trans men’s self-identification as men. The tactical claiming of “male” terminology in reference to body parts often seen as female, together with the refashioning of “female” terminology so that it can refer to men, works to construct trans men as male-bodied despite the powerful discourses that insist otherwise.

Conclusion

Perhaps more than any other aspect of language, the lexicon is available for metalinguistic reflection. As Michael Silverstein (1981) has observed, words are above the “level of awareness,” and this leaves them available to be

consciously chosen, rejected, changed, and commented upon. This availability is part of why variationist sociolinguists have often emphasized other aspects of speakers' language use—such as particular pronunciations or grammatical constructions—in their efforts to uncover the profoundly systematic nature of vernacular language. In language and sexuality studies in particular, there has been some contention over whether the “lavender lexicon” (in the words of Leap 1995 and others) is a useful realm of investigation. In light of the data presented in this chapter, it seems crucial to recognize that speakers' metalinguistic awareness when it comes to words is precisely what makes the lexicon a powerful tool of social change: people can choose how to use words, others are likely to notice, and interlocutors analyze each other's language use in ways that at times seem quite effortless. One can see this process of power negotiation through lexical semantics at work among early language and gender researchers who made linguistic androcentrism—particularly in the form of words like *man(kind)*, the generic masculine pronoun, and unequal forms of address for women and men (e.g., *Mrs./Miss* vs. *Mr.*)—a concrete front on which to battle gender-based oppression, with some real success (see many of the essays in Cameron 1998; see also McConnell-Ginet 2003 on the term *queer*). At the same time, the sometimes mixed outcome of the feminist revolution (so far, that is) is a reminder that language planning rarely goes exactly as intended.

Even so, it is important to be cautious in ascribing intent, because the now familiar tropes about trans people's subversion of the gender binary—or their failure to do so—are not warranted here. There is no doubt that the gender binary itself has been left more or less untouched by the particular practices I have highlighted. This chapter is more fundamentally about identity and embodiment, what happens when they are pulled apart, and how they can be mended back together. It is not an argument to dispense with the analytical categories of gender and sex, nor is it a claim that the trans speakers discussed here would advocate such a deconstruction. In addition to being a useful way of dislodging biological essentialism, a conceptual distinction between gender and sex is crucial for the way many trans people articulate a self-identified, internally felt gender separate from their assigned sex. Over time, however, many trans people have become uncomfortable with a system that treats only nontrans people as biologically and naturally female or male and implies that, however a trans person might change or experience her or his body, it will never be quite like the real thing.

Instead of consenting to the insistence of doctors and dictionaries that certain physiological characteristics make a person female-bodied, the trans men whose talk I have highlighted here destabilize the boundaries between female and male embodiment by decoupling gender and body while making both a matter of self-determination. Social scientists have often remarked that the experiences of trans people press researchers to consider what it means to

be a woman or a man, and what the limits of these categories are. But perhaps there is something else we can learn as well: the possibilities for empowerment that are created when we reclaim authority over our own bodies. As important as it is to recognize the oppressive power of language, particularly when subjugation disguises itself as nature and common sense as it so often does, we must go further. The next step is to discover how these systems can be remade.

Notes

1. Not all members of this community identify as male. However, my focus here is talk from and about male-identified trans people because of the distinct ways in which they challenge the sex/gender binary. See Bershtling (this volume) for a treatment of genderqueer identity.

2. It is important to note that many trans women engage in similar practices in reference to their own bodies. However, my research is primarily among trans men, which enables me to comment in detail on the linguistic practices of this group. Additionally, trans women appear to have vaginoplasties in greater numbers than trans men have phalloplasties, for a variety of reasons, which makes trans men especially well positioned to demonstrate how discourse can do its work even in the absence of changes to the body.

3. Authors writing about trans men's genitals often denigrate the results of phalloplasties (generally on the basis of secondhand accounts), referring to them as "inadequate," "non-functional," or having "poor cosmetic results." Function (and presumably aesthetic value as well) is often judged on the standards of heteronormative sexuality (e.g., Garber 1997): Is coitus possible? How much does the organ visually resemble current genital ideals? Is it too small? The "wrong" shape? Are there any differences that call attention to the fact that sexual contact falls short of an idealized norm, such as the use of special devices to assist erection? (Interestingly, these questions coincide closely with many nontrans men's anxieties about their own 'normal' genitals.) Individual trans men prioritize different goals, such as being able to urinate while standing, retaining full erotic sensation, engaging in insertive intercourse, or having an average-sized penis; these differences result in different choices in surgical method, if genital surgery is pursued.

4. TransMenOnline is a pseudonym. All examples that appear in this chapter are drawn from postings that are publicly available to anyone with internet access (at the time of data collection), and the individuals quoted here were contacted for permission to publish their comments. However, quotations appear without attribution in order to maintain posters' anonymity to the greatest extent possible.

5. All examples appear as originally posted, including any typos, misspellings, and so forth.

6. *Gender dysphoria* (often shortened to simply *dysphoria*) is a clinical term that refers to profound discomfort, disidentification, distress, or unhappiness with one's assigned sex or gender. It has also been adopted by many trans people as a way of talking about this set of feelings.

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